

patients with hyperglycaemia and DKA. While the exact mechanisms underlying this phenomenon remain unclear, several factors may contribute, including electrolyte disturbances, hormonal imbalances, and inflammatory processes [8,9]. This entails reevaluating current guidelines regarding SGLT2 inhibitor discontinuation pre-surgery, as their effects may persist beyond suggested discontinuation periods. Healthcare professionals must be educated about eDKA's potential risks and predisposing factors post-bariatric surgery. Patient education plays a crucial role, emphasizing increased vigilance during periods of low food intake, surgery, or acute illness. Close monitoring and prompt intervention are vital in mitigating eDKA risk in these high-risk scenarios.

Additionally, the impact of psychological factors such as stress and anxiety on appetite regulation cannot be overlooked. Clinicians should consider a multidisciplinary approach to address appetite loss in diabetic patients, including nutritional support [10], psychological counseling, and close monitoring for complications. Further research is needed to elucidate the pathophysiology of persistent appetite suppression in this population and to develop targeted interventions aimed at improving nutritional status and overall outcomes.

Conclusion

Persistent appetite loss following treatment for hyperglycemia and diabetic ketoacidosis presents a significant clinical challenge, with implications for patient management and outcomes. Despite aggressive medical interventions aimed at correcting metabolic derangements, affected individuals continue to experience reduced appetite, which may adversely impact nutritional status and recovery. Clinicians must recognize the complexity of this phenomenon and adopt a holistic approach to patient care, addressing not only glycemic control but also factors contributing to appetite suppression. Moving forward, further research is warranted to elucidate the underlying mechanisms of persistent appetite loss in diabetic patients and to identify effective therapeutic strategies. Collaborative efforts involving endocrinologists, nutritionists, and mental health professionals are essential to optimize patient outcomes and improve quality of life. By addressing this clinically relevant issue, we can enhance our understanding of diabetic

complications and ultimately improve the care provided to affected individuals.

Conflict of Interest

None

References

None

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