

DIABETES TYPE 1

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DEFENITION

A group of metabolic disorders sharing underlying feature of hyperglycemia

Type 1: insulin dependent or juvenile onset diabete melitus

ETIOLOGY

- **Beta cell destruction**
 - **Leading to absolute ins deficiency**
 - **Immune mediated**
 - **idiopathic**
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PATHOPHYSIOLOGY

- Genetic
 - Autoimmune:85% autoantibody
 - Infection
 - Vaccine
 - Gluten
 - Toxin
 - Disease of the pancreas
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DIAGNOSIS

- Age: <20 yrs
- Symp:polyuira.
- polydipsia.
- polyphagia.
- fatigue.
- weight loss.
- DKA
- LAB:BS>200 random
- Hgb a1c>6.5

SYMPTOMS

- Polyuria
- Polydipsia
- Weight loss
- Feeling tired and lethargic
- Feeling hungry
- Headache
- Leg cramps
- Abdominal pain
- Nausea
- Vomiting
- Yeast infection
- Blurry vision
- Behavioural changes: Mood swings, inability to concentrate, irritation and weak performance in studies and activities

COMPARING

TYPE 1

Nor overweight

Severe onset

Weight loss

Polyuria

Polydipsia

Insulinopenia

Auto AB

No ins resistance

TYPE 2

Overweight or obese

Insidious

Some

Polyuria

Polydipsia

no insulinopenia

No auto AB

Insulin resistance



TREATMENT

Insulin

Pancreas transplant

Stem cell transplant

Gene therapy



INSULIN

<1 yrs:vial NPH & REG

1-2 Yrs:contraversy

>2yrs: penfill



GOOD CONTROL

- **Insulin injection**
 - **Proper nutrition**
 - **SMBG**
 - **exercise**
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COMPLICATIONS

- Hypothyroidism
 - Celiac disease
 - Retinopathy
 - Nephropathy
 - hypoglycemia
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PREVENTION

Genetic

Autoantibodies

Hygiene hypothesis

Stem cell transplant

