

# CLINICAL PRESENTATION OF JUVENILE DIABETES (TYPE 1 DIABETES)

By: Sarat Malempati VII Semester

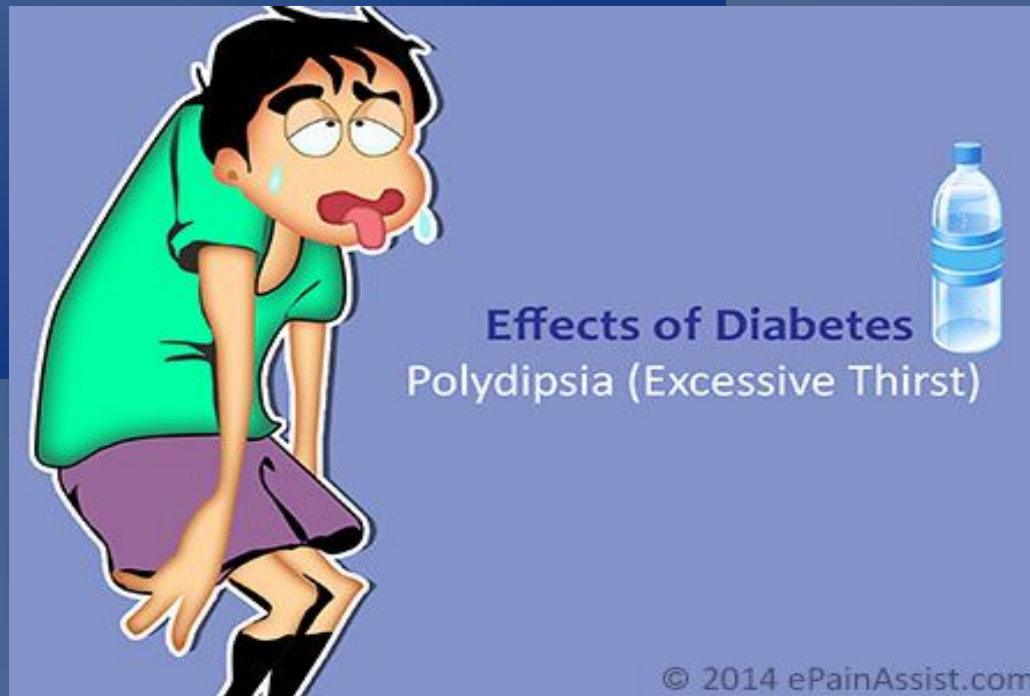
# General Features

- Usually children or adolescent age group
- They usually have had symptoms, with an acute increase leading to consultation
- The general complaints are
  - Polyuria
  - Nocturia (in children)
  - Polydypsia
  - Recent weight loss
  - Polyphagia
  - Fatigue



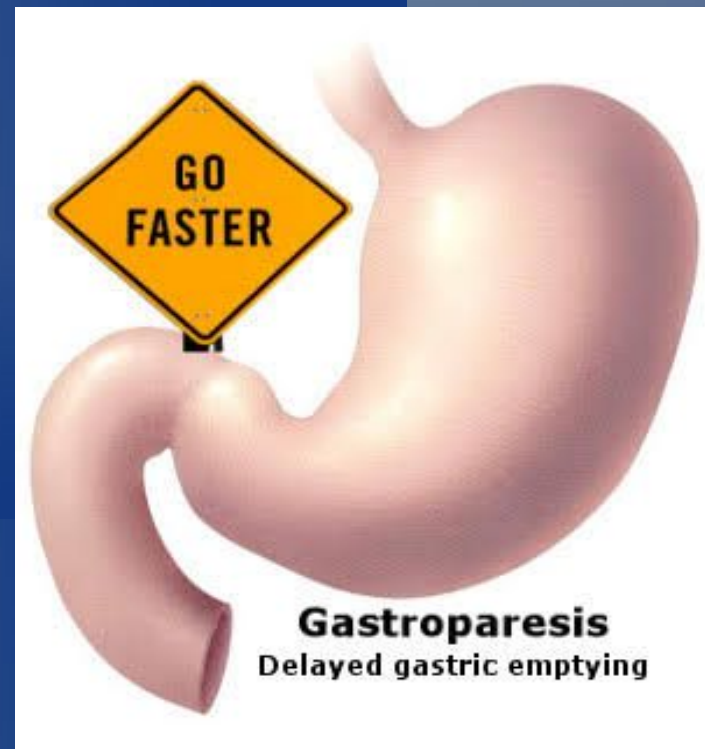
# Central Symptoms

- Polydipsia
- Polyphagia
  - Predilection for sweet foods
- Fatigue
- Stupor



# Gastric Symptoms

- Nausea
- Vomiting
- Abdominal pain
- Heartburn/ Gastric reflux
- Gastroparesis

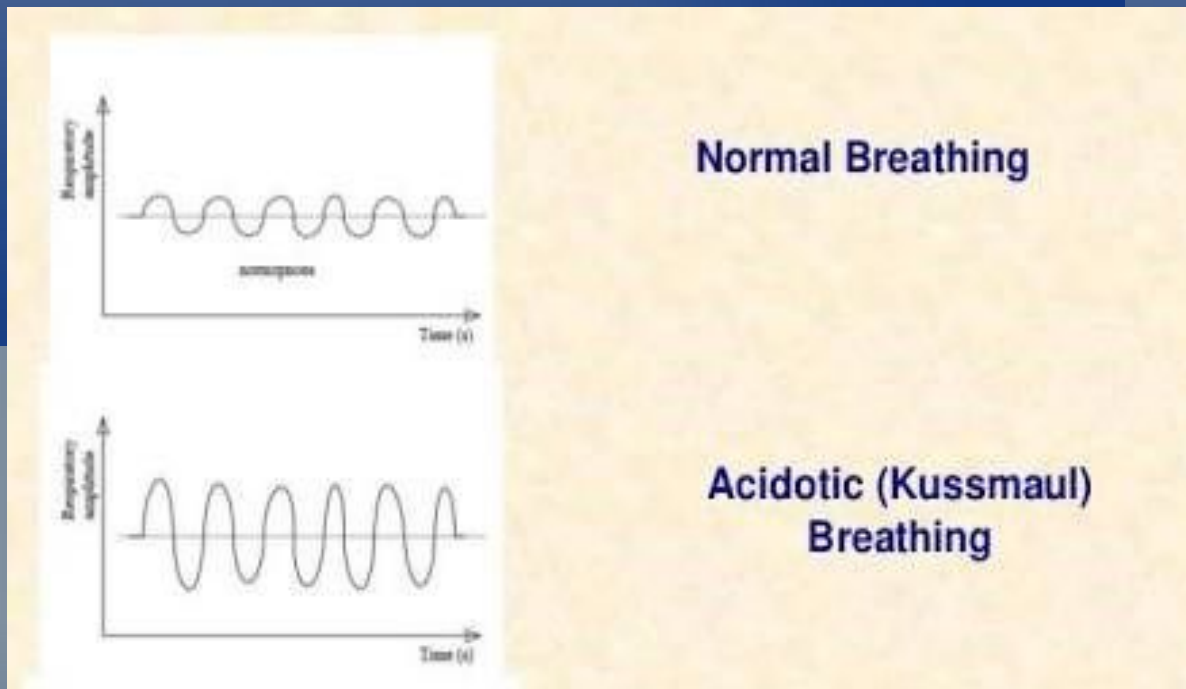


# Systemic Symptoms

- Recent or sudden weight loss
- Recent acute infections
- Wounds slow to heal
- Muscle cramps from electrolyte imbalances
- Peripheral Neuropathy in glove and stocking pattern
  - Bilateral, symmetrical and ascending

# Respiratory Symptoms

- Respiratory: Kussmaul breathing (hyperventilation)
- Sweet smelling breath (smell of acetone)



# Main symptoms of Diabetes

blue = more common  
in Type 1

## Central

- Polydipsia
- Polyphagia
- Lethargy
- Stupor

## Eyes

- Blurred vision

## Breath

- Smell of acetone

## Systemic

- Weight loss

## Respiratory

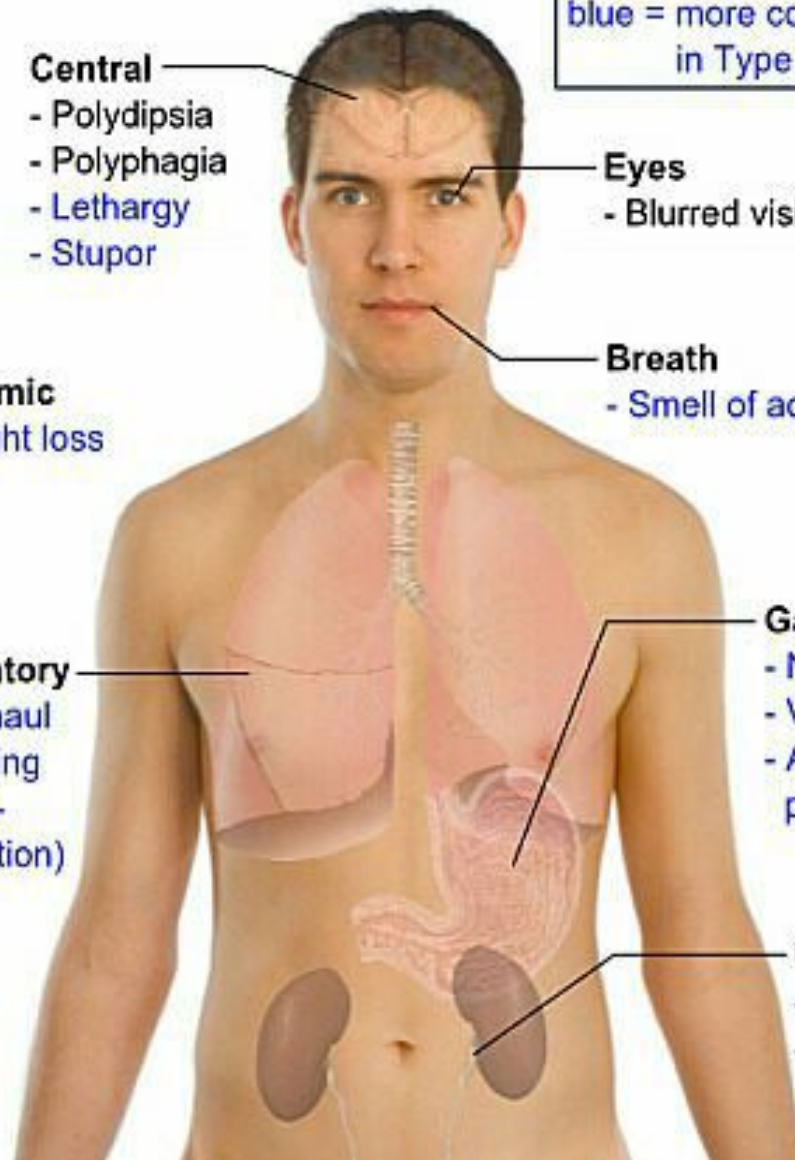
- Kussmaul breathing  
(hyper-ventilation)

## Gastric

- Nausea
- Vomiting
- Abdominal pain

## Urinary

- Polyuria
- Glycosuria



# Clinical Features in Diabetics Using Insulin

- Confusion, drowsiness, speech difficulty
- Anxiety
- Headache
- Hunger
- Nervousness
- Rapid heartbeat (palpitations)
- Shaking
- Sweating
- Weakness



# Diabetic Emergencies

- Diabetic ketoacidosis
- Metabolic disturbances
  - Nausea, vomiting, abdominal pain
- Uneasiness, confusion, seizures and unconsciousness
- Speech difficulty



# SYMPTOMS



SHAKING



SWEATING



ANXIOUS



DIZZINESS



HUNGER



FAST HEARDBEAT



IMPAIRED VISION



WEAKNESS  
FATIGUE



HEADACHE



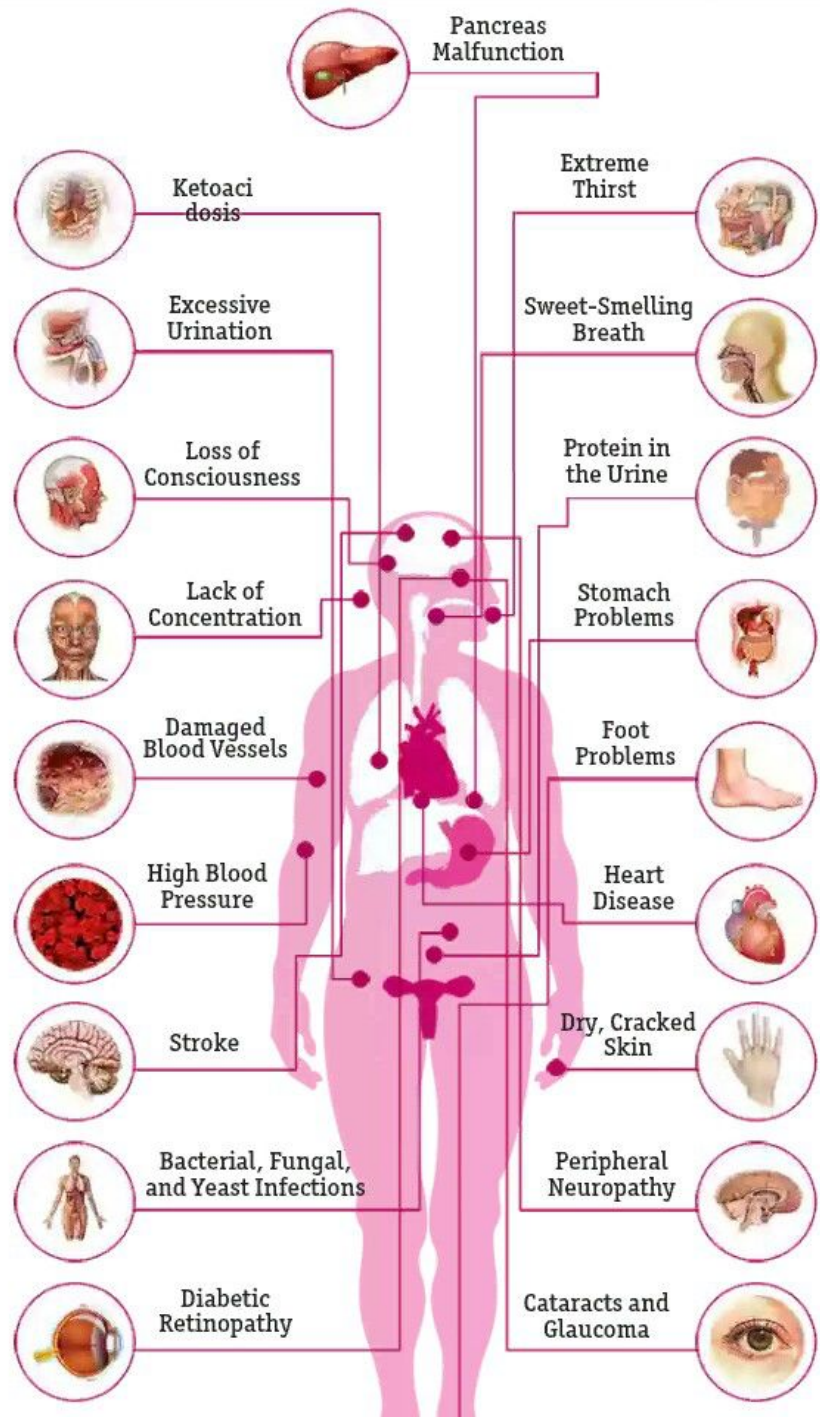
IRRITABLE

# Acute Clinical Features

- Polyuria
- Polydypsia
- Polyphagia
- Weightloss
- Fatigue
  - The onset of these symptoms are faster in juvenile diabetes

# Late Clinical Features

- Mostly related to complications of diabetes
  - Retinopathy
  - Renal dysfunction
  - Sensory loss
  - Motor weaknesses
  - Cardiovascular dysfunctions
  - Postural hypotension
  - Ulceration
  - Growth retardation in children
  - Chronic, recurrent infections



DIAGNOSIS  
HISTORY  
PHYSICAL  
EXAMINATION  
LABORATORY  
TESTS  
TREATMENT  
PREVENTION



# TYPE 1

- Symptoms usually start in childhood (<40 years)
- Duration of symptoms: weeks
- Episodes of low blood sugar are common
- No family history
- Not associated with excess body weight
- Higher than normal ketone levels/ ketonuria
- Insulin injections required
- Circulating antibodies
- Other autoimmune diseases

## TYPE 2

- Symptoms usually start in later ages (>50 years)
- Duration of symptoms: months to years
- Episodes of low blood sugar are uncommon
- Family history is common
- Usually associated with excess body weight
- Ketones are not as high/ no ketonuria
- Do not need insulin injections
- No circulating antibodies
- Other autoimmune diseases uncommon



# Thank You

Laughter is the best medicine...well, unless you're diabetic. Then insulin is probably better.



som<sub>ee</sub>cards  
user card