

CLINICAL PRESENTATION OF JUVENILE DIABETES (TYPE 1 DIABETES)

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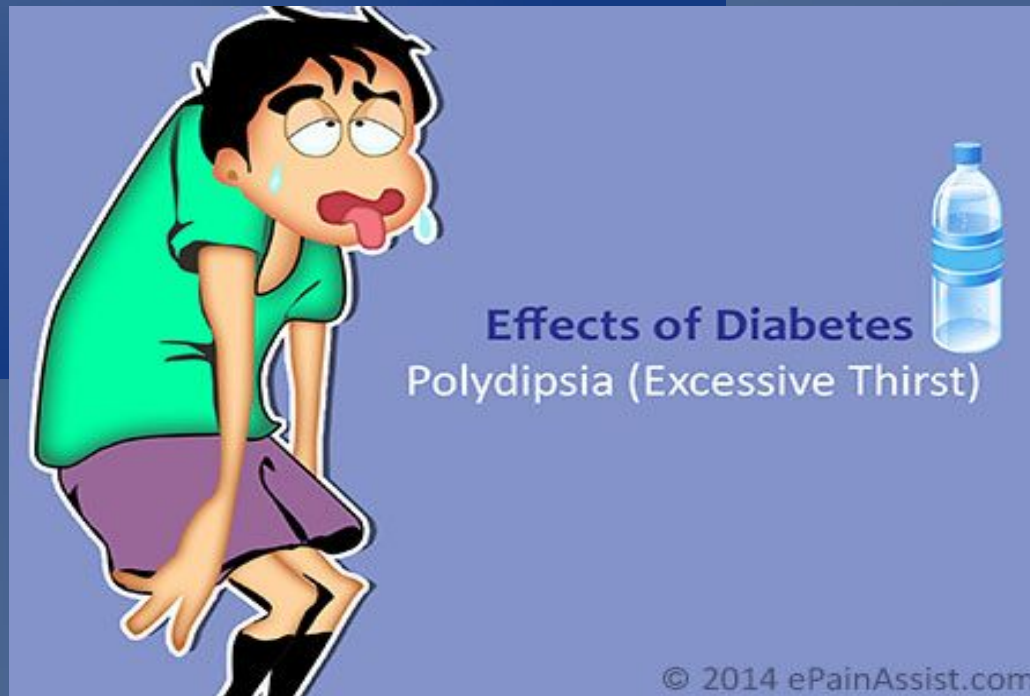
General Features

- 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



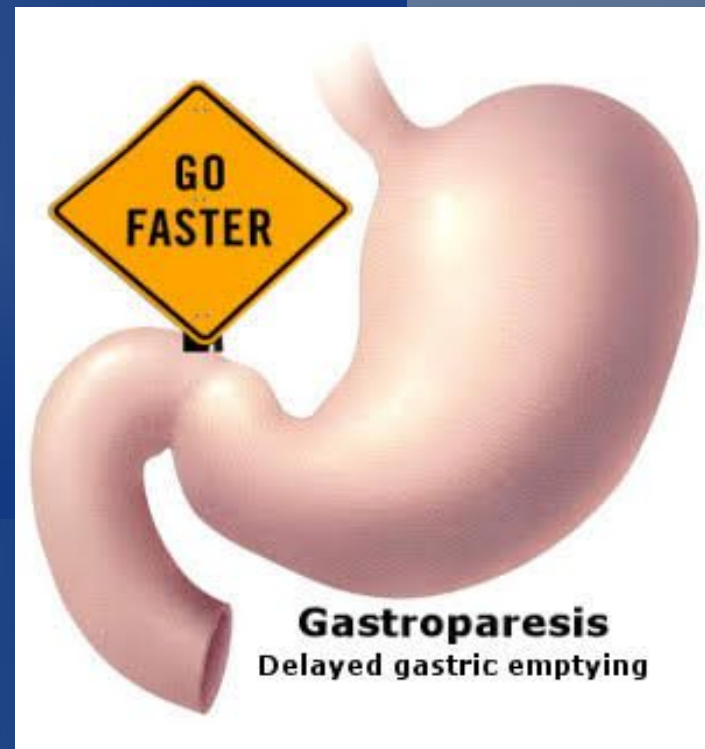
Central Symptoms

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



Gastric Symptoms

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

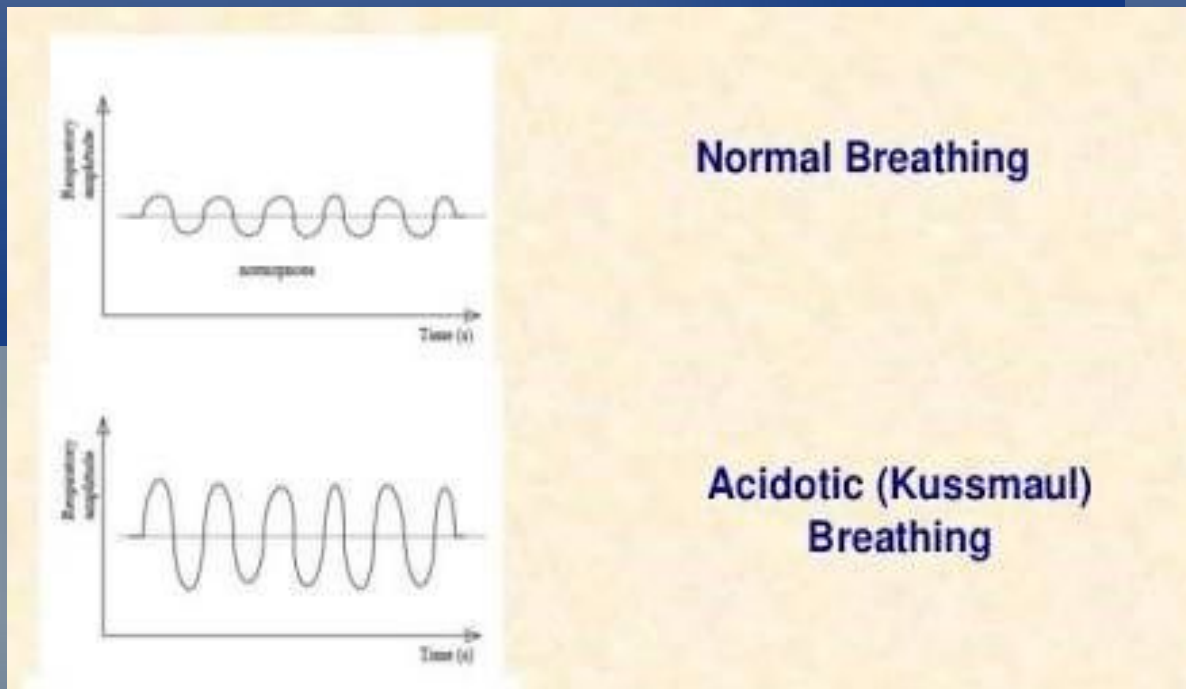


Systemic Symptoms

- 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

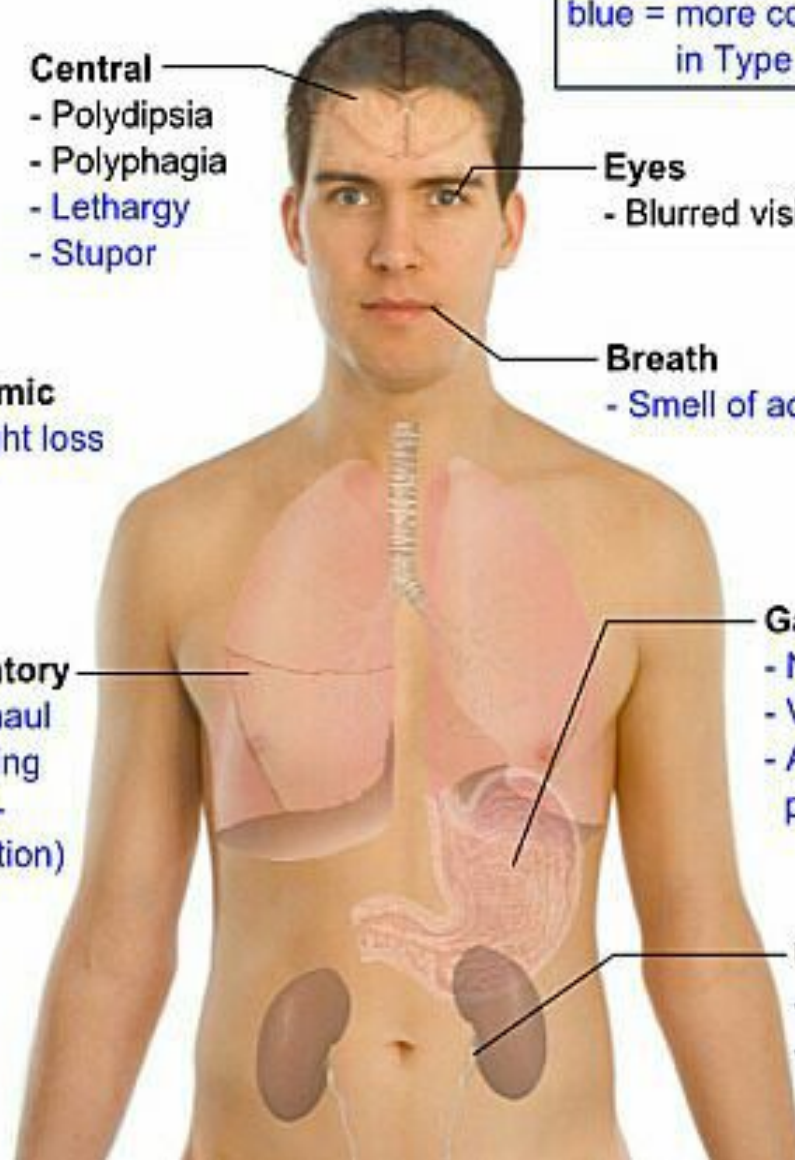
- Kussmaul breathing
(hyper-ventilation)

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



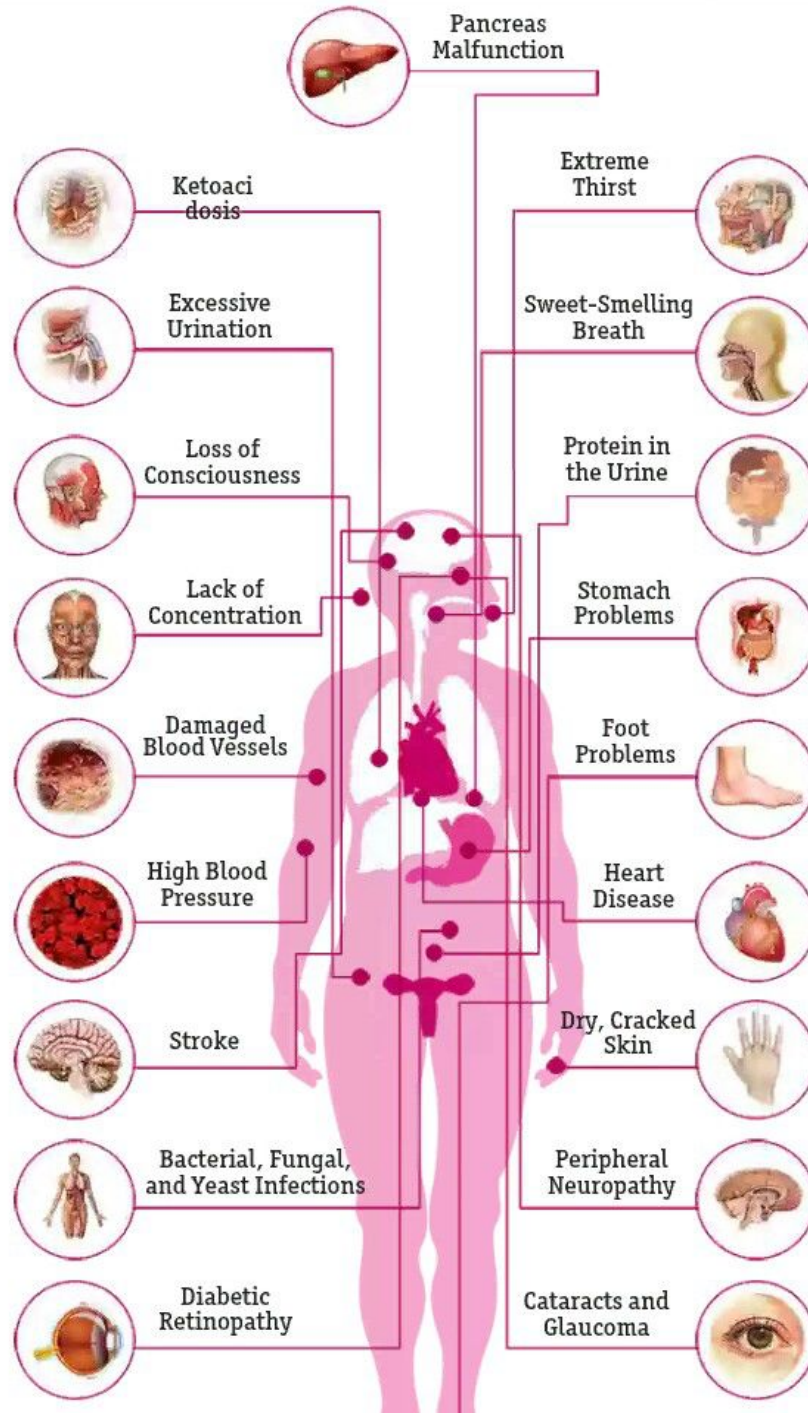
IRRITABLE

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



Differences Between TYPE 1 & TYPE 2 Diabetes Mellitus

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.



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user card