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A Report on Type 1 Diabetes Mellitus

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Opinion

Diabetes mellitus, also known simply as diabetes, is a group of metabolic disorders characterised by a persistently high blood sugar level. Frequent urination, increased thirst, and increased appetite are common symptoms. Diabetes, if left untreated, can lead to a variety of health complications. Diabetic ketoacidosis, hyperosmolar hyperglycemia, and death are all examples of acute complications. Cardiovascular disease, stroke, chronic kidney disease, foot ulcers, nerve damage, eye damage, and cognitive impairment are all serious long-term complications.

Diabetes is caused by either the pancreas failing to produce enough insulin or the body's cells failing to respond properly to the insulin produced. Diabetes mellitus is classified into three types:

Type 1 diabetes is caused by the pancreas' inability to produce enough insulin due to beta cell loss. This condition was previously known as "insulindependent diabetes mellitus" or "juvenile diabetes." An autoimmune response is responsible for beta cell loss. The exact cause of this autoimmune reaction is unknown.

Insulin resistance, a condition in which cells fail to respond properly to insulin, is the starting point for type 2 diabetes. A lack of insulin may develop as the disease progresses. This condition was previously known as "non-insulindependent diabetes mellitus" or "adult-onset diabetes." The most common cause is a combination of obesity and a lack of exercise.

Gestational diabetes is the third most common type, and it occurs when pregnant women who have never had diabetes develop high blood sugar levels.

Insulin injections are required to manage type 1 diabetes. Maintaining a healthy diet, regular physical activity, a normal body weight, and abstaining from tobacco use are all part of the prevention and treatment of type 2 diabetes. Type 2 diabetes can be managed with medications such as insulin sensitizers, which can be taken with or without insulin. Blood pressure control, as well as proper foot and eye care, are critical for people with the disease. Low blood sugar can be caused by insulin and some oral medications. Obesity weight loss surgery is sometimes an effective treatment for type 2 diabetes patients. Gestational diabetes usually goes away after the baby is born.

Type 1 diabetes is distinguished by the loss of insulin-producing beta cells in the pancreatic islets, resulting in insulin deficiency. This type is further subdivided into immune-mediated and idiopathic. The majority of type 1 diabetes is immune-mediated, with a T cell-mediated autoimmune attack leading to beta cell and thus insulin loss. It is responsible for approximately 10% of diabetes mellitus cases in North America and Europe. When onset occurs, the majority of affected people are otherwise healthy and of a healthy weight. Insulin sensitivity and responsiveness are usually normal, especially in the early stages.

Although type 1 diabetes has been dubbed "juvenile diabetes" due to its frequent onset in children, the vast majority of people living with it are now adults.

Brittle diabetes, also known as unstable diabetes or labile diabetes, is a term that has traditionally been used to describe the dramatic and recurrent swings in glucose levels that occur in insulin-dependent diabetes for no apparent reason. This term, on the other hand, has no biological basis and should not be used. Nonetheless, type 1 diabetes can be accompanied by irregular and unpredictable high blood sugar levels, as well as the risk of diabetic ketoacidosis or severe low blood sugar levels. Other complications include an impaired counter regulatory response to low blood sugar, infection, gastro paresis (which causes erratic carbohydrate absorption), and endocrinopathies (such as Addison's disease). These occurrences are thought to occur only in 1% to 2% of people with type 1 diabetes.

Type 1 diabetes is inherited in part, with multiple genes, including certain HLA genotypes, known to influence diabetes risk. Diabetes can be triggered by one or more environmental factors, such as a viral infection or diet, in genetically susceptible people. Several viruses have been implicated, but there is no conclusive evidence to support this hypothesis in humans to date. Data suggest that gliadin (a protein found in gluten) may play a role in the development of type 1 diabetes, but the mechanism is not fully understood.

Type 1 diabetes can strike at any age, and a significant proportion of cases are diagnosed in adulthood. When type 1 diabetes develops in adults, it is referred to as latent autoimmune diabetes of adults (LADA); the onset is slower than in children. Because of this distinction, some people refer to this condition as "type 1.5 diabetes." Adults with LADA are frequently misdiagnosed as having type 2 diabetes at first, based on their age rather than a cause.

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