



Proceeding

Volume 3 Suppl 1 – March 2017
DOI: 10.19080/AJPN.2017.03.555665

Acad J Ped Neonatol

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10 Year Old with New Diabetes Presentation and Negative Autoimmunity

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Submission: March 05, 2017; **Published:** March 28, 2017

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Case Presentation

A 10 year old Kuwaiti boy was diagnosed with type 1 diabetes mellitus at 9 years, with a history of polydipsia, polyuria, and weight loss for 1 week duration. He was admitted to hospital with hyperglycemia without ketosis or acidosis and he received full education by the diabetic team and dietician. He was discharged after 5 days on basal and rapid acting insulin and regular follow up in the pediatric diabetic outpatient department. There was no history of recent fever or any recent stress.

He had a positive family history of type 1 diabetes mellitus in father's cousin and type 2 diabetes mellitus in grandparents on his father's side.

Investigations at Diagnosis

Complete blood count, renal function test, liver function test, bone profile, lipid profile, and thyroid function test were

all normal. HbA1c was 12% and celiac screen was negative. Anti GAD was negative and Insulin autoantibodies were <0.4 U/ml. C-peptide was =104pmol/L. Urine microalbumin/creatinine ratio = 4mg/g.

Progress

1 year after diagnosis, he was switched to insulin pump therapy, with improvement in the HbA1c to 6.4%. However, he had repeated infusion set blocking and dislodging causing repeated hyperglycemia and insulin delivery was discontinued and basal bolus regime of insulin was commenced. In view of the negative autoimmunity and the positive family history of diabetes, MODY was considered and genetic testing is done and awaited.



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