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American endocrinology diabetes guidelines

Type 2 diabetes is common in older adults, but recently there has been an alarming upswing in the number of American children diagnosed with the disease. Type 2 diabetes, once considered only an adult disease, affects an increasing number of children under the age of 18. In type 2 diabetes, s gradually loses its ability to produce enough insulin to control a person's blood sugar levels. People with diabetes can develop serious complications, such as heart disease, stroke, kidney failure, blindness and premature death. According to SEARCH for Diabetes in Youth, a multicenter study funded by the Centers for Disease Control (CDC) and the National Institutes of Health, during 2008 and 2009 it is estimated that 18,436 people under the age of 20 in the United States were recently diagnosed with type 1 diabetes each year. In addition, 5,089 people under the age of 20 were diagnosed each year with type 2 diabetes. The study cited obesity, exposure to diabetes in the womb and endocrine disruptive chemicals in common household products as possible causes of increased type 2 diabetes. Type 2 diabetes disproportionately affects minority groups. According to the CDC, the incidence of type 2 diabetes between the ages of 10 and 19 is highest among American Indians, followed by African Americans, Hispanics and Asian or Pacific Islanders. It is lower among non-Hispanic whites. Today is World Diabetes Day, and Healthline sat down with two pediatricians to find out why more children are being diagnosed with type 2 diabetes and what can be done to prevent children from receiving the disease. Related News: FDA Approves Jardiance for Type 2 Diabetes » Dr. Angela Lennon, a pediatric endocrinologist at the University of Kansas Hospital, told Healthline that she sees obese children aged 12 to 14 with kidney problems, heart problems and high blood pressure. Many of the complications begin 10 years after getting diabetes. The sooner you get diabetes, the more you are prone to complications. The typical complication is kidney disease, which is the number one reason for adults having dialysis. Diabetes is the number one reason for blindness. People with diabetes usually have poor circulation and poor wound healing, so some should have cut limbs or legs. Heart disease is also a problem. I saw an 18-year-old with all these problems already, Lennon said. Lennon cited figures from the American Diabetes Association, which show that about 3,700 U.S. youth are diagnosed with type 2 diabetes a year, while 15,000 young people are diagnosed with type 1 diabetes. Type 2 is a quarter of the incidence of type 1, but decades ago, less than 5 percent [of children diagnosed] had type 2. Now nearly 20 percent will have type 2, he said. More: People with Diabetes Have More Stress » Most of the children Lennon sees are in the prediabetes stage, and although they feel good and are healthy otherwise, they are usually overweight. Thickening and darkening in the neck, or back of the neck, is a sign of insulin levels, or insulin resistance. Most of the time, they feel good. If they keep gaining weight and don't eat well, over time they develop type 2. When they have type 2 they start urinating a lot, drinking heavily, and having weight loss. They think they're actually doing well because they're losing weight, but they feel tired and don't feel healthy, she said. Dr. Stephen Lauer, a pediatrician at the University of Kansas Hospital, echoed Lennon's concern. Many of the children we see won't hit formal diagnosis until their 20s and early 30s, but this will be a very different health issue than being diagnosed with diabetes in their 50s and 60s. The number of children who are in a prediabetic, or insulin-resistant, state is many more than the number who have a formal diagnosis, he said, adding, The health burden will be huge coming out of this. So why are these numbers going up now? One in three children is obese or overweight. We know that the biggest risk factor that has changed is obesity. The CDC predicts that of those born in 2000, one in three will also develop diabetes, Lennon said. While genetic predisposition is a huge risk factor for diabetes, all ethnic groups have been affected by rising obesity rates. Many groups also live in neighborhoods called food deserts, where there are no supermarkets nearby and access to healthy food is limited. High calorie foods is usually cheaper. Access to affordable healthy food is a common complaint from parents. It's not necessarily that they don't know or don't want to improve their diet, but they have to feed big families and have to set their budgets, Lennon said. Children cannot stroll through the neighborhood, parents don't feel it's a safe area, and they don't feel comfortable with their kids going to the park. You have to pay for sport at school and go to a gym. Finance definitely plays a very important role, Lennon added. The availability of healthy foods in the urban core is a big problem, which the University of Kansas Medical Center recently addressed through a partnership with the Argentine Neighborhood Development Association and Save-a-Lot Food Stores. The partnership culminated in the opening of a supermarket in the Argentine neighborhood of Kansas City in February of that year, following the closure in 2006 of the neighborhood's only supermarket. The whole idea is to get into food deserts – areas where you can't get to a place that sells what we think of as healthy foods – and have regular food as an item available to families. This is a neighborhood interaction to improve health, Lauer said. Many times parents of overweight children are also overweight, and do not eat well or exercise. It tends to be a multigenerational question. It is very difficult to address because much of it is not truly medical. It is the environment in which they live and their ability on a day-to-day basis to live these Styles. If they are living in an environment that is not very healthy in terms of diet and exercise, this would put them at greater risk, Lauer. Lauer said makes it a point to discuss children's growth charts with their parents on every visit. He points out that if there is an increase in the child's weight, it is unhealthy. One of the most important things Lauer advises is not skipping breakfast, because doing so throws the entire food cycle off balance. Lauer also recommends children, who are drinking more sports drinks, soft drinks and fruit juices than ever before, only consume milk and water. Children should also eat slowly. They have to slow down, and sit down when they eat. They shouldn't get seconds until after 15 minutes. It takes a while for your body to understand that you've eaten and that you're no longer hungry, Lauer said. It's also wise for parents to buy the supermarket's outer perimeter. If you look at the way supermarkets are willing, the product is in a corner, fresh meat and fish are at the back. Most of the fresh and healthy food is around the perimeter. All processed foods and stuff in 2ned is in the middle. Stay out of the middle of the supermarket, Lauer. Lauer said can't emphasize enough the importance of exercising. You have to get up and move. While the number of calories we have taken has increased over the years, the decrease in children's level of activity is really marked, especially in the urban core. Lauer and Lennon are in favor of those kids who have access to technology using apps to track how much they exercise in a day and what they've eaten, as well as to learn how many calories there are in different foods. Finally, Lennon recommends that parents do not introduce excess calories into their children's diets. People say children are going to grow fat baby when they are teenagers. Most do not help the baby's fat. A lot of overweight teenagers end up as overweight teenagers, and then overweight adults. There is no magic time you start losing all fat just because you have a growth boost. This is a misconception. We are now very proactive and we need to start early, he concluded. Photo Kim Kimminau, Ann Murguia and Natty Malachi at a neighborhood grocery store. Courtesy of the University of Kansas Medical Center. Diabetes is a metabolic disease; it is also called diabetes mellitus. It is a long-term health condition. There are three different types. Diabetes 1 occurs when the body does not produce any insulin. Insulin is necessary to regulate blood sugar levels. Diabetes 2 occurs when the body does not produce enough insulin. Gestational diabetes can affect women during pregnancy. High blood sugar levels lead to polyuria (frequent urination), pepsis (increased thirst) and polyphagy (increased hunger). Pre-diabetes is a condition where of the body are becoming insulin resistant. Insulin injections, a special diet, and exercise are used to treat diabetes 1, the second type is more common, and and with tablets, following a special diet, and insulin injections may be necessary, but they are not a daily treatment. People with diabetes can develop secondary health problems - eye complications such as diabetic retinopathy, hypertension, foot complications, hearing loss and many health risks increase with diabetes. The body also heals much more slowly. Slowly.

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