



Written By: Dr. Jay
(Jay Amin M.D.)

What are the different types of diabetes?

For a practical standpoint, there are three types of diabetes:

Type 1, Type 2 and gestational diabetes.

Type 2 diabetes; is the most common form of diabetes, accounting for about 95% of diabetic patients. If properly managed, it usually does not require insulin therapy. On the other hand, Type 1 diabetes, which requires insulin therapy, accounts for less than 5% of cases.

Gestational diabetes refers to development of diabetes during pregnancy. After pregnancy ends, most of these women return to "normal" blood glucose ranges. However, within 10 years, more than 50% of women with gestational diabetes will develop Type 2 diabetes.

In Type 1 diabetes; there is complete destruction of insulin producing cells (beta cells) in the pancreas and consequently, insulin production stops. Therefore, these patients have to take insulin on a regular basis in order to sustain their life. If they stop taking insulin, these patients can rapidly lapse into a coma and die if treatment is not instituted in time. On the other hand, in Type 2 diabetes, the body is able to produce insulin, but there is resistance to the action of insulin at the cellular level. Type 2 diabetes is part of Insulin Resistance Syndrome and we will focus on this type of diabetes in the remainder of this chapter. In the past,



Written By: Dr. Jay
(Jay Amin M.D.)

Type 2 diabetes was also called NIDDM (non insulin dependent diabetes mellitus) or Adult Onset Diabetes.

Type 1 diabetes was called IDDM (insulin dependent diabetes mellitus) or Juvenile Onset Diabetes.

We have stopped using these older terms because they can be inaccurate and misleading. For example, some Type 2 diabetic patients end up on insulin and many physicians mistakenly classify these patients as IDDM (Type 1). Although Type 1 diabetes typically develops at a young age, it can develop in an adult. In the past, most young people with diabetes were classified as Type 1. However, sometimes Type 2 diabetes develops in teenagers.

Actually, Type 2 diabetes in teenagers is on an alarming rise, primarily due to our "fast food culture" and a lack of physical activity in the teenage population.

Type 2 diabetes is a silent killer. It develops slowly over a period of years. Usually there are no symptoms for a long time. Patients often have vague, non-specific symptoms such as fatigue and usually blame it on getting old. Unfortunately, during this time, complications of diabetes are usually developing and the patient may ultimately have any of the following symptoms:



Written By: Dr. Jay
(Jay Amin M.D.)

- * Tingling, numbness, burning sensation or pain in feet, fingers or both.
- * Memory loss
- * Stroke
- * Transient loss of vision
- * Chest pain/heart attack
- * Impotence
- * Excessive thirst
- * Frequent urination
- * Blurry vision
- * Drowsiness, coma

Excessive thirst and urination, blurry vision, drowsiness and coma are usually symptoms of severe diabetes. Type 1 diabetes usually has more dramatic symptoms such as

- * Weight loss
- * Excessive thirst.
- * Frequent urination especially waking up several times at night to urinate.
- * A life-threatening condition known as Diabetic Keto-Acidosis (DKA).

In this condition, a patient may experience nausea, vomiting, abdominal pain, mental confusion, drowsiness and can even lapse into coma. These patients usually have a fruity smell to their breath. Patients with DKA are usually Type 1 diabetics, although it can occur in Type 2 diabetics,