

# A Little Comment about Diabetes in Young People

Raghil Stranberg\*

Centre for Evidence Based Practice, Bergen University College, Norway

## Corresponding Author\*

Raghil Stranberg

Centre for Evidence Based Practice, Bergen University College, Norway

E-mail: ragille123@gmail.com

**Copyright:** © 2024 Raghil S. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

**Received:** 2-Mar-2024, Manuscript No. jdm-24-30659; **Editor assigned:** 4-Mar-2024, PreQC No. jdm-24-30659; **Reviewed:** 18-Mar-2024, QC No. jdm-24-30659; **Revised:** 22-Mar-2024, Manuscript No. jdm-24-30659; **Published:** 29-Mar-2024, DOI: 10.35248/2155-6156.10001107

**Keywords:** Diabetes in young people; Type-1 diabetes; Type-2 diabetes; Adolescents; Children; Management challenges; Education; Support; Prevention strategies; Public health

## Editorial Note

Diabetes once thought of as a condition primarily affecting older adults, is increasingly becoming a significant health concern among young people worldwide. With rising rates of both Type-1 and Type-2 diabetes in adolescents and children, there is a pressing need to address this issue comprehensively. This article explores the implications of diabetes in young individuals, the challenges they face in managing the condition, and the importance of education, support, and prevention strategies in mitigating its impact.

Diabetes, once considered primarily an affliction of the middle-aged and elderly, is increasingly affecting younger populations worldwide. Among them, adolescents and even children are being diagnosed with diabetes at alarming rates. This trend is not only concerning but also demands urgent attention and action from healthcare systems, policymakers, educators, and parents alike.

Type-1 diabetes, previously known as juvenile diabetes, is characterized by the body's inability to produce insulin, the hormone essential for regulating blood sugar levels. While Type-1 diabetes has traditionally been associated with younger individuals, Type-2 diabetes, typically linked with lifestyle factors such as obesity and physical inactivity, is now on the rise among adolescents and even younger children. This shift is attributed to the global surge in childhood obesity rates and sedentary lifestyles, coupled with genetic predispositions.

The consequences of diabetes in young people are multifaceted and profound. Physically, uncontrolled diabetes can lead to a range of complications, including heart disease, kidney failure, nerve damage, vision impairment, and lower limb amputations. Moreover, the emotional and psychological toll of living with a chronic condition like diabetes can be significant, potentially impacting mental health, self-esteem, and quality of life.

Managing diabetes in young individuals presents unique challenges. Adolescence is a time marked by hormonal changes, peer pressure, and a desire for independence, all of which can disrupt diabetes [1-4] management routines. Balancing blood sugar levels amidst the demands of school, extracurricular activities, and social engagements requires diligence and support from caregivers and healthcare providers.

Education plays a pivotal role in empowering young people with diabetes to take charge of their health. They must learn how to monitor their blood sugar levels, administer insulin injections or use insulin pumps, make healthy food

choices, and recognize the signs of hypo- and hyperglycemia. Equipping them with these skills not only fosters self-reliance but also reduces the risk of acute complications and long-term health consequences.

Furthermore, fostering a supportive environment is crucial in helping young individuals cope with the challenges of diabetes. Schools can implement policies that accommodate the needs of students with diabetes, such as allowing them to test their blood sugar levels or administer insulin discreetly. Peer support groups and mentorship programs can also provide invaluable emotional and practical support.

Prevention remains the cornerstone of combating the diabetes epidemic among young people. Efforts to promote healthy lifestyles, including regular physical activity and balanced nutrition, must start early in childhood and extend throughout adolescence. This necessitates collaboration among healthcare providers, educators, community leaders, and policymakers to create environments that facilitate healthy choices and reduce the prevalence of risk factors like obesity.

## Future Scope

The future of diabetes management in young people holds promise with advancements in technology, research, and holistic approaches to healthcare.

**Technological innovations:** Continued advancements in wearable devices, continuous glucose monitors (CGMs), insulin pumps, and closed-loop systems hold the potential to revolutionize diabetes management for young individuals. Integration of artificial intelligence (AI) algorithms for personalized insulin dosing and predictive analytics for detecting trends in blood sugar levels could further enhance the effectiveness and convenience of diabetes care.

**Telemedicine and digital health solutions:** Telemedicine platforms and mobile health applications offer convenient and accessible avenues for remote monitoring, consultation, and education. Integrating these digital health solutions into diabetes management programs can improve adherence, facilitate communication between patients and healthcare providers, and empower young people to take control of their health.

**Precision medicine:** Advances in genomic research and personalized medicine may lead to tailored treatment approaches based on an individual's genetic predisposition, metabolic profile, and lifestyle factors. Precision medicine holds the potential to optimize diabetes management strategies, improve outcomes, and minimize the risk of complications in young patients.

**Behavioral interventions:** Psychosocial factors play a significant role in diabetes management among young people. Future interventions may focus on addressing psychological barriers, promoting resilience, and enhancing coping mechanisms to improve adherence to treatment regimens and foster overall well-being.

**Community engagement and advocacy:** Grassroots initiatives, community-based programs, and advocacy efforts can raise awareness, reduce stigma, and promote healthy behaviors at the local level. Engaging schools, youth organizations, and community leaders in diabetes prevention and management efforts can create supportive environments conducive to positive health outcomes.

**Research into diabetes prevention:** Investing in research to identify modifiable risk factors, such as sedentary behavior, poor dietary habits, and environmental influences, is essential for developing targeted prevention strategies. Early intervention programs focused on promoting healthy lifestyles and addressing socioeconomic disparities can help curb the rising incidence of diabetes among young populations.

**Global collaboration and policy initiatives:** Addressing the diabetes epidemic among young people requires a coordinated, multisectoral approach involving governments, healthcare systems, academia, industry, and civil

society organizations. International collaborations, policy interventions, and regulatory measures aimed at promoting healthy environments, regulating food marketing to children, and improving access to healthcare services are essential for tackling this public health challenge on a global scale.

## Conclusion

In conclusion, diabetes in young people is a pressing public health issue that warrants concerted efforts at various levels. By raising awareness, enhancing education, fostering supportive environments, and prioritizing prevention, we can mitigate the impact of diabetes on the lives of young individuals and safeguard their health and well-being for generations to come. It's time to act decisively to stem the tide of diabetes among our youth and ensure a healthier future for all. In conclusion, the future of diabetes management in young people holds great potential for innovation, collaboration, and progress. By harnessing technological advancements, adopting personalized approaches to care, addressing psychosocial factors, promoting community engagement,

and advocating for policy changes, we can improve outcomes and enhance the quality of life for young individuals living with diabetes.

## References

1. Gabrielli O, Clarke LA, Bruni S, Coppa GV (2010) Enzyme-replacement therapy in a 5-month-old boy with attenuated presymptomatic MPS I: 5-year follow-up. *Pediatrics*, 125: e183-e187.
2. Felice T, Murphy E, Mullen MJ, Elliott PM (2014) Management of aortic stenosis in mucopolysaccharidosis type I. *Int J Cardiol* 172: e430-e431.
3. Jeschke MG, Gauglitz GG, Finnerty CC, Kraft R, Mlcak RP, et al. (2014) Survivors versus nonsurvivors postburn: differences in inflammatory and hypermetabolic trajectories. *Ann Surg* 259: 814-823.
4. Gore DC, Ferrando A, Barnett J, Wolf SE, Desai M, et al. (2000) Influence of glucose kinetics on plasma lactate concentration and energy expenditure in severely burned patients. *J Trauma* 49: 673-678.