Which children are at risk for type 2 diabetes?

A number of factors can increase the risk of type 2 diabetes in children:

• Being overweight
• Being physically inactive
• Having a family history of diabetes in a parent or sibling
• Having an African American, Hispanic/Latino, American Indian, Asian American, or Pacific Islander family background
• Being born to a mother who had gestational diabetes (diabetes during pregnancy)

The best way to prevent type 2 diabetes during childhood is for your child to maintain a healthy weight and get plenty of exercise.

What is the difference between type 1 and type 2 diabetes in children?

In both type 1 and type 2 diabetes, levels of glucose (sugar) in the blood are higher than normal. Type 1 diabetes occurs when the pancreas, an organ located in the abdomen, is damaged and produces little or no insulin. Insulin is the hormone that helps move glucose from your bloodstream into your cells, where it is used for energy. Without insulin, glucose levels in the blood get too high. Type 1 diabetes is sometimes called juvenile diabetes.

Most forms of type 2 diabetes occur when the body becomes resistant to the effect of insulin, meaning it cannot use insulin properly. Although the body makes some insulin, it is not enough to overcome this resistance, so glucose levels in the blood get too high.

Type 2 diabetes usually develops in middle age or later, but it is becoming more and more common among children and adolescents in the United States. Most young people with type 2 diabetes develop it after age 10.

Diabetes is a serious disease. If left untreated or poorly controlled, over time it can lead to blindness, kidney failure, nerve damage, heart disease, stroke, and high blood pressure. Unlike type 1 diabetes, type 2 diabetes can be prevented.

DID YOU KNOW?

Type 1 diabetes is the most common form of diabetes in children, but type 2 diabetes also occurs in children and adolescents.
HOW CAN YOU TELL IF YOUR CHILD HAS TYPE 2 DIABETES?

Although some children have no signs or symptoms of diabetes, others may have
• Increased thirst and urination
• Increased hunger
• Fatigue
• Blurred vision
• Slow-healing sores or frequent infections
• Patches of dark, velvety skin between the fingers or toes or on the back of the neck

If your child has risk factors or shows signs of diabetes, see your health care provider. Your doctor or nurse will do blood tests to check the levels of glucose in your child's blood. If the tests show diabetes, your doctor will discuss treatment options with you.

HOW IS TYPE 2 DIABETES IN CHILDREN TREATED?

For some children, the disease can be managed with diet and exercise alone. Many children also need to take medication to control blood glucose levels. Insulin and some oral diabetes medications are approved in the U.S. to treat children with type 2 diabetes.

Specific treatment depends on the individual child and his or her blood glucose level. Your family and diabetes care team should work together to find the best approach for your child.

HOW CAN YOU HELP YOUR CHILD WITH TYPE 2 DIABETES?

Successful treatment of type 2 diabetes requires personal motivation and self-management—following a healthy eating plan, being physically active, regularly monitoring blood glucose levels, and taking medication as prescribed. Complying with a treatment plan can be hard for pre-teens and teens who do not want to be different from their peers. It is important to inform your child's school of the diagnosis and to develop a care plan for school.

A critical factor in helping your child manage type 2 diabetes is family support and involvement. The entire family should follow a healthy lifestyle, including diet and exercise. This not only benefits the child with diabetes but also may help prevent the disease in siblings. Work with your child to create a plan for taking medications and monitoring glucose levels. Support your child and encourage him or her to talk freely about concerns and problems.

Questions to ask your doctor

• What kind of diabetes does my child have?
• What should my child eat?
• Does my child need medications for diabetes?
• Do I need to check my child’s blood glucose level?
• Should my child see a diabetes educator?
• Should my child see a pediatric endocrinologist?

RESOURCES

• Find-an-Endocrinologist: www.hormone.org or call 1-800-HORMONE (1-800-467-6663)
• Find a diabetes educator (American Association of Diabetes Educators): www.diabeteseducator.org/DiabetesEducation/Find.html
• Hormone Health Network information about diabetes: www.hormone.org/diabetes
• National Diabetes Information Clearinghouse (National Institutes of Health): diabetes.niddk.nih.gov
• The American Diabetes Association: www.diabetes.org

The Hormone Health Network offers free, online resources based on the most advanced clinical and scientific knowledge from The Endocrine Society (www.endo-society.org). The Network’s goal is to move patients from educated to engaged, from informed to active partners in their health care. This fact sheet is also available in Spanish at www.hormone.org/Spanish.

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