Fact Sheet: Signs & Symptoms of Juvenile Diabetes

Diabetes is one of the most common chronic diseases affecting children. Type 1 diabetes is commonly known as juvenile diabetes because it typically strikes during childhood or adolescence. Individuals with type 1 diabetes will always need to take insulin, either through injections or through an insulin pump. The rate at which young people are diagnosed with type 1 diabetes is much higher than diagnosis of type 2 diabetes, known as “adult onset diabetes.” During 2008–2009, an estimated 18,436 people younger than 20 years of age in the United States were newly diagnosed with Type 1 diabetes annually, and 5,089 people younger than 20 years were newly diagnosed with Type 2 diabetes annually.

The signs and symptoms of Type 1 diabetes in children usually develop quickly, over a period of weeks. Parents should be aware of the following signs and symptoms identified by The American Diabetes Association:

- **Increased thirst and frequent urination:** As excess sugar builds up in a child’s bloodstream, fluid is pulled from the tissues. This may leave the child thirsty. As a result, the child may drink and urinate more than usual.

- **Extreme hunger:** Without enough insulin children muscles and organs become energy-depleted. This triggers intense hunger.

- **Weight loss.** Despite eating more than usual to relieve hunger, children may lose weight sometimes rapidly. Without the energy sugar supplies, muscle tissues and fat stores simply shrink.

- **Fatigue:** When a child’s cells are deprived of sugar, he or she may become tired and lethargic.

- **Irritability or unusual behavior.** Children with undiagnosed Type 1 diabetes may suddenly seem moody or irritable.

- **Blurred vision:** Fluid may be pulled from the lenses of a child’s eyes. This may affect your child’s ability to focus clearly.

If you notice any of the signs or symptoms of Type 1 diabetes in your child, you should contact your child’s medical provider. Untreated diabetes can have serious, lifelong consequences for a child. Short-term risks are hyperglycemia (high blood sugar), hypoglycemia, (low blood sugar), diabetic ketoacidosis (increased ketones in the urine) and coma. Long-term risks are primarily vascular and nerve damage, resulting in blindness, kidney failure, amputations and increased risk of heart attack or stroke. Since children don’t necessarily understand the long-term consequences, it is the responsibility of the parents and other caregivers to make sure children get a proper diagnosis and treatment.

[1] SEARCH for Diabetes in Youth Study. [www.searchfordiabetes.org](http://www.searchfordiabetes.org)