

# Preventing inheritance risks and environmental triggers in the case of diabetes t...

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## **Diabetes Mellitus, Type 2**

### **Prevention in Children and Adolescents**

#### **Diabetes Mellitus, Type 2: Prevention in Children and Adolescents**

In America there are many children that are affected by diabetes. A combination of inherited risk factors along with different environmental triggers has put a rise in the development of diabetes. The child may not be aware of how likely they are at risk for the disease in their childhood. Juvenile diabetes is a huge controversy in America. With obesity rates sky rocketing in the 21st century among children, many are at high risk for the disease than ever before. “ Largely due to the obesity epidemic, children and adolescents now represent up to 45% of new diagnoses of DM2 in the U. S.” (Cagle, 2014, Page 1). Overweight children with this inherited gene for diabetes are at risk for other diseases such as heart and liver disease. This paper will discuss the issue of diabetes in children and what we can do as health care providers to decrease the already rising epidemic.

Diabetes is a disorders when the body can't regulate its blood sugar or glucose levels. It is caused by the absence of insulin production or the cells ignore the insulin. Type 2 diabetes is known as insulin-dependent diabetes and is the most common form of diabetes. According to the American Diabetes Association, “ 25. 8 million children and adults in the United States, 8. 3% of the population have diabetes” (American Diabetes association, 2014).

“ Most patients with type 2 diabetes may remain asymptomatic for years prior to diagnosis; in adolescents, the condition is usually diagnosed during

puberty (i. e., between the ages of 12 and 16 years) as a result of incidental lab results indicating glycosuria or hyperglycemia (Caple, 2014). There is continued research on why and how diabetes occurs in children and adolescences. While there is not a cure for diabetes, the patient can control the process. With the development of diabetes the body will never again produce insulin. Children and adolescents that are living with diabetes often have a difficult time. Many challenges present themselves for both the children and their parents, with proper knowledge the barriers can typically be overcome. For a better understanding of diabetes, the patient needs to understand the different symptoms that are accompanied with the diagnosis. The signs and symptoms that occur are increased thirst, urination, and hunger, as well as confusion, fatigue, blurred vision, fruity breath, dry skin, and glucose in the urine. “ Early detection and treatment of diabetes can decrease the risk of developing the complications of diabetes” (American Diabetes Association, 2014).

Type 2 diabetes can be fatal if one goes untreated. People with type 2 diabetes are able to manage their diabetes simply by eating healthy and exercise. The doctor may need prescribe oral medications and/or insulin to help meet the patients target blood glucose levels. Along with the increased prevalence of diabetes among children and adolescence there is an increase allergies to peanuts and other foods. These two things share common characteristics because the immune system balances and controls the various mechanisms and affects the interaction for reactivity to a persons’ organs and related tissues. With this new outbreak of disorders parents have to be careful with what goes on around their children. “ Small, short-term

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studies have demonstrated an association between lifestyle modifications (e. g., increased physical activity, reduced sugar intake, increased fiber intake) and improvements in key DM2 risk factors. (Caple, 2014)

As healthcare providers it is important that we remain knowledgeable about the different ways to prevent diabetes and the different risk factors for type 2 diabetes in children and adolescents. This will help to accurately assess a patients' characteristics and health education needs. We then need to share the information collected with the other members of the health care team so that an appropriate treatment plan can be established.

The nurse needs to discuss the available school-based or community programs related to type 2 diabetes. Putting a strong emphasis on the development of prevention strategies personalized to children and adolescents with the diabetes. Make the necessary referrals for education and activity program that specialize in physical education, diet, vendors, churches, and media campaigns. Also, discuss problem-solving skills that support ways to avoid pressure from fellow peers to engage in unhealthy behaviors, and encourage networking with other families dealing with type 2 diabetes prevention strategies. Lastly provide the much needed assistance for weight management with continuous screening of glucose tolerance and insulin resistance as well as determining individual barriers to weight loss, put a plan in place.