

Neonatal Diabetes

Neonatal diabetes is a rare form of diabetes that is usually diagnosed in children under 6 months of age.

This early occurring type of diabetes is caused by one of a number of genetic mutations and is therefore described as a *monogenic* form of diabetes.

Neonatal diabetes is treatable and may or may not require insulin so a diagnosis by genetic testing is recommended.

In Bangladesh, neonatal diabetes though is not so common, but its presence is not unusual.

Types of neonatal diabetes

There are two main types of neonatal diabetes:

- Transient Neonatal Diabetes Mellitus
- Permanent Neonatal Diabetes Mellitus

Transient neonatal diabetes is so called because it usually disappears within a year of birth but can come back again typically during adolescence.

Permanent neonatal diabetes, once diagnosed, stays for the rest of life.

How common is neonatal diabetes?

Neonatal diabetes is very rare, occurring in around **1 in 300,000 to 1 in 400,000 births**.

Out of the two types of neonatal diabetes, the transient type is slightly more common affecting 50-60% of cases of neonatal diabetes. ^[105]

Symptoms and diagnosis

The symptoms of neonatal diabetes include persistent thirst, frequent urination and dehydration. ^[103]

Presence of diabetes mellitus can be diagnosed with a blood glucose test. A diagnosis of diabetes before 6 months should suggest neonatal diabetes, as opposed to type 1 diabetes.

In some cases, neonatal diabetes may be diagnosed after 6 months however.

Genetic testing is advised for children diagnosed with diabetes under the age of 9 months to assess which form of diabetes is present and to guide the best form of treatment. ^[104]

Treatment

Neonatal diabetes will usually either be treated with a drug called glibenclamide or with insulin.

Around 50% of people with neonatal diabetes can be treated with glibenclamide, a drug which causes the pancreas to release more insulin. Glibenclamide is in a class of diabetes drugs called sulfonylureas. If glibenclamide is not effective enough, insulin will need to be taken.

If neonatal diabetes is transient, it won't require treatment during the years in which it is resolved. However, the condition should be monitored for reappearance of diabetes in adolescence and later years.

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