

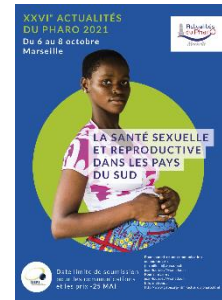
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Chronic complications of type 1 diabetes in children in Dakar

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Introduction: Chronic complications of type 1 diabetes are rare in children. The aim of this study was to determine their prevalence in the paediatric setting and the factors associated with them.

Methodology: This was a prospective study, conducted in two reference services for the management of childhood diabetes at the Dakar University Hospital. We included all type 1 diabetic patients whose age was less than 20 years according to the ISPAD 2009 recommendations.

Results: Of the 67 patients in our cohort, only 46 met the inclusion criteria. There were 19 boys and 27 girls. The mean age was 11.6 years \pm 4.3 years. The mean age of discovery was 8.7 years \pm 3.8 years. The mean duration of evolution was 34 months. Almost half of the patients had a mean glycated haemoglobin of more than 9%. Growth retardation was severe in 17% and moderate in 11% of cases. Five patients (20%) had significant microalbuminuria and 5 (20%) had retinopathy, 3 with macular oedema and the other 2 with diffuse microhaemorrhages.

Multivariate analysis of the different parameters studied showed that retinopathy was associated with high HbA1c values ($p=0.043$) and poor compliance with treatment ($p=0.021$). Nephropathy was only associated with poor compliance with $p=0.0025$.

Conclusion: Chronic complications of T1DM are not rare, especially in our regions where management is not optimal. We suggest that they should be detected at around 10-11 years of age, regardless of the duration of the diabetes.