



UNIVERSITY OF
BIRMINGHAM



**BPSU surveillance of Type 2 diabetes in children and young people under 17 years
of age in the UK and ROI
Commences in April 2015**
(Short Study Name: Type 2 diabetes)

Until recently, Type 2 diabetes was only seen in mature adults. However we are now seeing similar cases in children. Although rare, we believe the number of new cases is increasing. A BPSU study in 2004 funded by Diabetes UK, identified 78 new cases (incidence cases) in a year and childhood obesity appeared to be a major association. Since 2004, levels of childhood obesity have continued to increase and we suspect cases of Type 2 diabetes will also be increasing in parallel. This second BPSU study will ascertain whether the incidence of Type 2 diabetes has increased and will re-assess diagnosis and management of this condition in the UK.

Duration: BPSU surveillance will be undertaken for 13 months, commencing in April 2015 until April 2016 with a 12 month follow-up.

Case definition: Please report any cases of children 0-17 years in the past month presenting with Type 2 diabetes as defined below. Please report all new suspected cases, even if the results are pending. The American Diabetes Association criteria for diagnosis of diabetes will be used.

Exclusion criteria

- Type 1 diabetes (positive auto-antibodies and/or persisting insulin requirement from diagnosis)
- Maturity Onset Diabetes of the Young (MODY) - suggested by a three generation, family history suggestive of dominantly inherited diabetes with normal weight
- Diabetes developing in a person with known diabetes associated syndrome such as Prader-Willi, Alstrom or Bardet-Biedl syndromes
- A diagnosis of diabetes while on medical therapy with a known diabetogenic medication (e.g., glucocorticoid, L-asparaginase, cyclosporine, tacrolimus, atypical antipsychotic, anticonvulsant)
- Pancreatic failure (such as that after acute pancreatitis or pancreatectomy)

Analytic Case Definition

Any case of confirmed, newly diagnosed Type 2 diabetes using following criteria:

Confirmed by the presence of raised insulin level (>132 pmols/litre or equivalent) or raised C peptide level (>600 pmols/litre)

OR

The patient is managed off insulin therapy for >9 months in the absence of auto-antibodies typical of Type 1 diabetes.

The latter definition is likely to be based on a clinical re-evaluation after diagnosis of diabetes when clinical course suggests a diagnosis other than type 1 diabetes.

Website: www.rcpch.ac.uk/bpsu/T2D

Funding: NIHR grant through the Rare Disease Translational Research Consortium

Ethical approval: This study has been approved by NRES Committee South West (REC reference: 14/SW/1143; IRAS Project ID: 162381) and has been granted Section 251 HRA-CAG permission (CAG reference: 15/CAG/0102))

Further information: If you would like any advice regarding the eligibility of a particular case for inclusion in the study please contact:

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