Abstract

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Neonatal diabetes mellitus: An update on diagnosis and management

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Abstract

Neonatal diabetes mellitus (DM) is defined by the onset of persistent hyperglycemia within the first six months of life but may present up to 12 months of life. A gene mutation affecting pancreatic beta cells or synthesis/secretion of insulin is present in more than 80%of the children with neonatal diabetes. Neonatal DM can be transient, permanent, or be a component of a syndrome. Genetic testing is important as a specific genetic mutation can significantly alter the treatment and outcome. Patients with mutations of either KCNJ11 or ABCC8 that encode subunits of the KATP channel gene mutation can be managed with sulfonylurea oral therapy while patients with other genetic mutations require insulin treatment. Ileus results.

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Biography

Dr. Mahmoud Metwaly Taha has a master degree in paediatrics and neonatology awarded from Zagazig university, Zagazig, Egypt. Currently working as senior neonatologist at Saudi German Hospital, Aseer, KSA.

