

Type 2 diabetes patients getting younger

Younger diabetics in Singapore were more overweight and had higher rates of health complications than those diagnosed at a later age, according to study

●●● BY CHUA HWEE LENG

PEOPLE IN SINGAPORE are developing type 2 diabetes at a younger age. But more worrying about this unusual statistic is that more of them have diabetes-related health complications than those diagnosed with the disease when older.

Type 2 diabetes, often attributed to obesity, little exercise and a generally sedentary lifestyle, usually starts in people after the age of 45-50.

But an international study of diabetics in nine Asian countries found that one in five adult patients, or 20 per cent, developed diabetes before they were 40 years old.

In Singapore, the percentage of diabetics with young-onset type 2 diabetes was higher.

“We didn’t expect the figure to be 30 per cent, and the average age that diabetes was diagnosed in this group was 30. That’s quite young,” said Dr Goh Su-Yen, Senior Consultant and Head, Department of Endocrinology, Singapore General Hospital (SGH).



WHEN DIABETES IS DIAGNOSED AT A YOUNGER AGE, IT MEANS THE PATIENT WOULD BE LIVING LONGER WITH DIABETES, COMPARED WITH SOMEONE WHO IS DIAGNOSED WITH THE DISEASE AT 50 OR 60.

DR GOH SU-YEN, SENIOR CONSULTANT AND HEAD, DEPARTMENT OF ENDOCRINOLOGY, SGH

SGH was the participating Singapore hospital in the Joint Asia Diabetes Evaluation (JADE) programme. The programme, which is ongoing and adding more countries to the study, comprised more than 41,000 patients between Nov 1, 2007, and Dec 21, 2012. People were classified as having young-onset diabetes if they were diagnosed before the age of 40. Patients for the study were also recruited from China, Hong Kong, India, the

Philippines, South Korea, Taiwan, Thailand and Vietnam.

The study found that in Asia, early-onset diabetes patients were more likely to be men, obese, use alcohol and tobacco, and have a family history of the disease. Although they were more likely to have received diabetes education, they were less likely to stick to a balanced diet and regular exercise.

In comparison, the early-onset SGH patients (96 patients versus 223 who were diagnosed with diabetes after the age of 40, or about 30 per cent) tended to be more obese than late-onset diabetes patients, but there was little difference by male-female and ethnic distribution, and whether they smoked, said Dr Goh.

The total number of Singaporean patients recruited for the JADE study was 385, of which 101 were diagnosed with diabetes before they were 40, or 26 per cent.

Another alarming feature was that just 10 per cent of the SGH young-onset diabetes patients were able to achieve HbA1c control (a level that is less than 7 per cent), versus 30 per cent for late-onset patients. HbA1c is a measure of diabetes control, and the higher the level, the greater the risk of developing diabetes-related complications.

Moreover, many of the young-onset

patients were already on insulin therapy to help them control their diabetes.

When the disease is not brought under control and the blood glucose levels stay high, the risk of complications like neuropathy or nerve damage, kidney damage, and heart problems increases.

Indeed, the study found that 7.4 per cent of the SGH young-onset patients had nerve damage compared with 1.8 per cent of late-onset patients; 13 per cent from retinopathy, which can lead to blindness (versus 11 per cent among the older group); and half of them were found to have protein in their urine, a sign of kidney damage. Just 36 per cent of the late-onset group had this problem.

“When diabetes is diagnosed at a younger age, it means the patient would be living longer with diabetes, compared with someone who is diagnosed with the disease at 50 or 60,” said Dr Goh.

Although the study did not examine the reasons for the differences between the two groups of patients, Dr Goh suggested that the multiple roles young patients play might be causing them to neglect their own health.

“They may belong to the ‘sandwich’ generation that is looking after their parents and their children. So their own condition may not be a priority. Also, at that age, they may not realise the implications



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of the poor control of the chronic disease, they may not see the complications, or to them, it (the reading of the indicators) is just a number,” she said.

The findings, she added, are “a call to action for anyone who manages diabetes as well as the patients themselves”.

