Simple blood test picks up risk of kids with type-2 diabetes
Saturday, 14 November 2009

NSW Deputy Premier and Minister for Health Carmel Tebbutt said today, on World Diabetes Day, that General Practitioners could now send children and young people at risk of Type 2 diabetes for a simple blood test.

Researchers at The Children's Hospital at Westmead have found that hospital admission is often preventable if fasting insulin and glucose tests are conducted at the same time in a simple blood test.

Triggered by obesity, lack of activity and stress, type-2 diabetes is on the rise in children and young people.

“Early intervention to prevent, or at least delay, the onset of type-2 diabetes is very important,” said Dr Sarah Garnett, Clinical Research Fellow in Diabetes at the Kids Research Institute, The Children’s Hospital at Westmead.

“Some cases can be treated with diet and exercise if picked up early.”

“Type-2 diabetes is difficult to control and complications are common and appear early in the disease,” Dr Garnett said. “That's why early detection is so important. “

Ms Tebbutt said an increasing number of young people were developing type-2 diabetes with most of the diagnoses occurring when children hit puberty. The condition used to be largely restricted to people in their middle age.

“General practitioners can now send children at risk of type-2 Diabetes for a simple blood test.” Ms Tebbutt said.

“Because of increased obesity levels, type-2 diabetes in young people is increasing and is a serious concern.

“This simple test is better for the child and is another way of easing pressure on the hospital system.

“In addition to the cost to the individual, type-2 diabetes has a high healthcare cost to society.”

Researchers reviewed the medical records of 224 young people who doctors considered to be at risk of pre type-2 Diabetes and had a two hour glucose tolerance test at The Children's Hospital at Westmead between 2000 and 2007.

“We found that if all 224 had one simple blood test for both insulin and glucose levels, 114 would have avoided the 2 hour test, “ said Dr Garnett. “Forty-five of these young people had pre-diabetes and 11 already had type-2 diabetes.”

“The aim of our study was to see if we could identify other fasting blood measures which would help decide who should go on to have a glucose tolerance test,” Dr Garnett said.

“Until now it has been unclear how to best identify those at risk of pre type-2 diabetes and many young people undergo a two hour glucose tolerance test which is time and resource intensive and can require hospital admission. Other young people just have a fasting glucose levels measured, which is known to be an inadequate screening test for pre diabetes,” Dr Garnett said.