

3.0 Classification of diabetes

3.1 Recommendation

- Attempt to classify the type of diabetes at diagnosis

3.2 Background

There are two main types of diabetes mellitus, termed type 1 and type 2. The distinction between the two is usually by clinical assessment:

Type 1 diabetes: Onset at any age, but particularly in the young; requires insulin for survival – prone to ketoacidosis; mostly due to autoimmune pancreatic islet β -cell destruction.

Type 2 diabetes: Includes the common major form of diabetes mellitus, resulting from defects in insulin secretion and insulin action, usually in combination. May or may not require insulin for glycaemic control.

Other types of diabetes: Other less common causes of diabetes can be identified. These include:

- Diseases of the exocrine pancreas
- Hepatic cirrhosis
- Steroid therapy
- Single gene defects affecting islet β -cells (insulin secretion) or insulin action
- Secondary endocrine diabetes (Cushing's syndrome, acromegaly and pheochromocytoma)
- Infections such as rubella
- Other rare genetic syndromes associated with diabetes, such as Klinefelter syndrome and Down syndrome.
- Uncommon forms of immune-related diabetes, such as due to insulin-receptor antibodies.

Gestational diabetes: A state of carbohydrate intolerance resulting in hyperglycaemia of variable severity, with onset or first recognition during pregnancy. It does not exclude the possibility that the glucose intolerance may antedate pregnancy, but has previously gone unrecognized. The definition applies irrespective of whether or not insulin is used for treatment or whether the condition persists after pregnancy (Section 10.2).