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Opinion Article

Diagnosis of diabetes and medical care

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DESCRIPTION

Diabetes mellitus, also known as diabetes, is a group of metabolic disorders characterized by a persistently high blood sugar level. Some symptoms can include frequent urination, increased thirst, and increased appetites are common. Blood glucose, which comes from the food you eat, is your main source of energy. Insulin, a pancreatic hormone, aids glucose absorption into cells for use as energy. Your body may not produce enough or any insulin, or it may not use it effectively. If diabetes has left untreated, then it can lead to a slew of health issues. Cardiovascular disease, stroke, chronic kidney disease, foot ulcers, nerve damage, eye damage, and cognitive impairment are all serious long-term complications. Diabetes is generally caused by either a shortage of insulin production by the pancreas or a lack of insulin response by the body's cells. Insulin is a hormone that aids in the carriage of glucose from food into cells for use as energy. Diabetes mellitus is mainly divided into three types.

Type 1 diabetes is caused by the loss of beta cells in the pancreas, which prevents the pancreas from producing enough insulin. Previously, this condition was known as "insulin-dependent diabetes mellitus" or "juvenile diabetes." An autoimmune response causes the loss of beta cells. This autoimmune response's cause is unknown. Type 1 diabetes most commonly manifests in childhood or adolescence, but it can also manifest in adults. Insulin resistance, a condition in which cells do not respond properly to insulin, is the starting point for Type 2 diabetes. A deficiency of insulin may improve as the disease progresses. Previously, this condition was known as "non-insulin-dependent diabetes mellitus" or "adult-onset diabetes." Although Type 2 diabetes is more common in older adults, an increase in the prevalence of obesity among children has resulted in an increase in the number of cases of Type 2 diabetes in children. A combination of excessive body weight and insufficient exercise is the most common cause. Gestational

With the goal of keeping both short-term and long-term blood glucose levels within acceptable bounds, people with diabetes can benefit from education about the disease and treatment, dietary changes, and exercise. Furthermore, because of the increased risk of cardiovascular disease, lifestyle changes are recommended to control blood pressure. Weight loss can help people with diabetes avoid progressing from prediabetes to diabetes Type 2, reduce their risk of cardiovascular disease, or even achieve partial remission. There is no single diet that is best for all diabetics. Healthy eating habits, such as the Mediterranean diet, low-carbohydrate diets, and DASH diets, are frequently recommended, despite the fact that there is no evidence to support one over the other. According to the American Diabetes Association, "reducing overall carbohydrate intake for individuals with diabetes has demonstrated the most evidence for improving glycemia," and low or very-lowcarbohydrate diets are a viable approach for individuals with Type 2 diabetes who cannot meet glycemic targets or where reducing anti-glycemic medications is a priority. For people with Type 2 diabetes who are overweight, any diet that helps them lose weight is beneficial. Injections of insulin are actually required to manage Type 1 diabetes. Type 2 diabetes can be prevented and treated by eating a healthy diet, exercising regularly, maintaining a healthy weight, and not smoking. Type 2 diabetes can be managed with or without insulin and oral anti-diabetic medications. Controlling blood pressure and providing proper foot and eye care are critical for those suffering from the disease. Low blood sugar can be caused by insulin and some oral medications (hypoglycemia). In people with Type 2 diabetes, weight loss surgery is sometimes an effective treatment option. Usually, gestational diabetes goes away after the baby is born.

diabetes is the third most common type of diabetes, and it occurs when pregnant women who have never had diabetes develop high blood sugar levels. Blood sugar levels in women with gestational diabetes usually return to normal shortly after delivery. If you've had gestational diabetes, however, you're more likely to develop Type 2 diabetes.

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