Type 3c Diabetes

Michelle Burke
Advanced Nurse Practitioner
South Eastern Health and Social Care Trust



Overview

- What is Diabetes.
- Diabetes:classification
- What is Type 3c Diabetes
- Characteristics and differences from other types of diabetes
- Prevalence
- Diagnosis



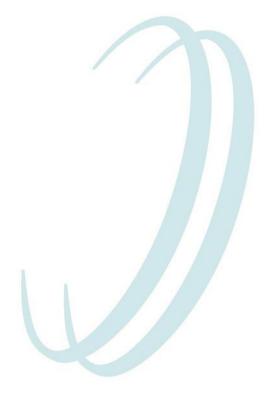
What is Diabetes?

Diabetes is a condition where the amount of glucose in the blood is too high.

This can be due to the inability of the body to produce insulin, or the insulin that is produced is not being used properly.



Poll Question





What is insulin for?

We eat food (carbohydrates)



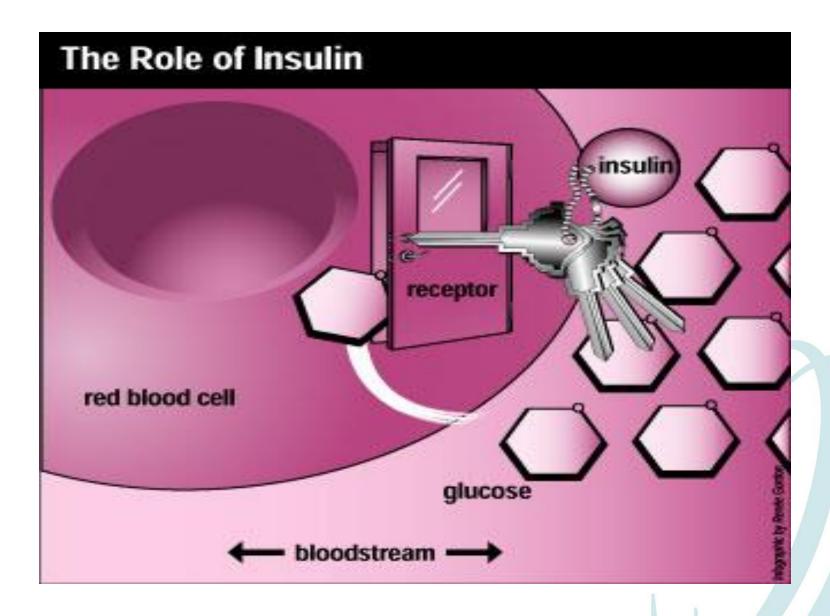




What is insulin for cont.

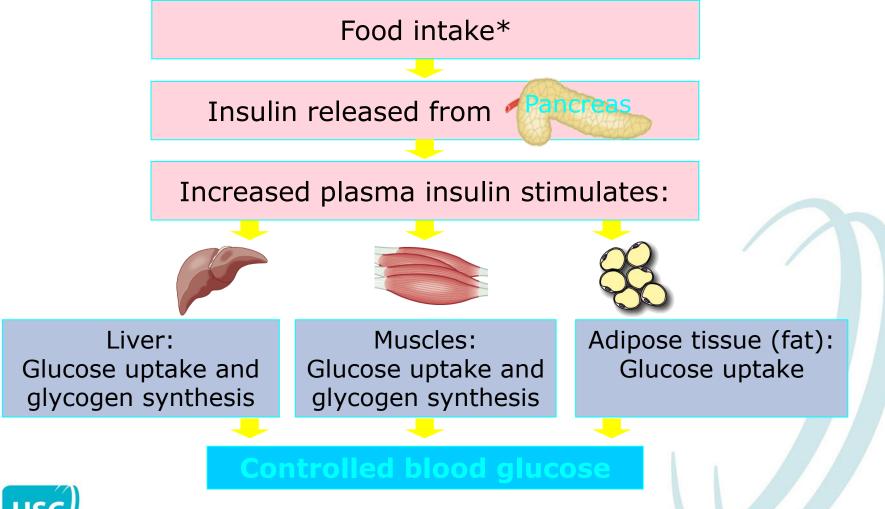
- Our bodies turn carbohydrate into sugar
- This sugar circulates in the bloodstream
- We need to get it from the bloodstream into the body cells to provide energy (like petrol to a car engine)







How insulin works





TYPES

- Type 1 (insulin dependant)
- Type 2
- MODY (maturity onset diabetes of the young)
 6 sub-types
- LADA (latent autoimmune diabetes in adults) type 1.5
- Gestational diabetes
- Type 3c
- Secondary causes



Type 1

 The beta cells (insulin producing cells in the pancreas) have been destroyed therefore the pancreas STOPS making insulin

Complete lack of insulin
Auto-immune / genetic factors
Usually in younger people



MAIN SYMPTOMS OF TYPE 1

- Increased thirst
- Passing more urine than usual, especially at night
- Extreme tiredness
- Weight loss

Dramatic onset (compared with type 2) due to cessation of insulin production





Type 2

- Pancreas can make some insulin-but not enough
- The insulin that is produced does not work properly

Reduced levels of insulin
Body is resistant to insulin that is
produced
Certain risk factors can lead to this



MAIN SYMPTOMS OF TYPE 2

May initially present with:-

- Thrush infections (genital)
- Erectile dysfunction
- Blurred vision
- Slow healing of cuts and wounds

As in Type 1:-

- Increased thirst
- Passing more urine than usual, especially at
- Extreme tiredness
- Weight loss

However...

Sometimes there is an absence of noticeable symptoms





Definition & Characteristics Type 3c

- Type 3c diabetes is diabetes secondary to pancreatic disease / damage to the pancreas
- Also known as pancreatogenic diabetes
- Characterised by progressive insulin deficiency.



Characteristics

Parameter	Type 1	Type 2 NIDDM	Type 3c Pancreatogenic
Ketoacidosis	Common	Rare	Rare
Hyperglycemia	Severe	Usually mild	Mild
Hypoglycemia	Common	Rare	Common
Peripheral insulin sensitivity	Normal or increased	Decreased	Increased
Hepatic insulin sensitivity	Normal	Normal or decreased	Decreased
Insulin levels	Low	High	Low
Glucagon levels	Normal or high	Normal or high	Low
PP levels	Normal or low (late)	High	Low
GIP levels	Normal or low	Normal	Low
GLP1 levels	Normal	Normal or low	Normal or high
Typical age of onset	Childhood or ado- lescence	Adulthood	Any

IDDM, insulin-dependent diabetes mellitus; NIDDM, noninsulin-dependent diabetes mellitus; PP, pancreatic polypeptide; GIP, glucose-dependent insulinotropic polypeptide;
GLP1, glucagon-like peptide 1. Modified, with permission, from
Slezak LA & Andersen DK 2001 Pancreatic resection: effects on
glucose metabolism. World Journal of Surgery 25 452–460.
Copyright 2001 International Society of Surgery.

(Cui & Anderson, 2012)

Poll Question





Prevalence of Type 3c diabetes

5%-10% of all diabetes mellitus cases in Western populations

 Chronic pancreatitis accounts for up to 80% of all type 3c diabetes mellitus cases

Could be higher as often cases are misclassified

(Ewald & Hardt, 2013)



Conditions related to Type 3c Diabetes

- Pancreatitis
- Pancreatic cancer
- Cystic fibrosis
- Haemochromatosis.

If you have pancreatic cancer there is a high risk of developing diabetes ie: poor glycaemic control

If you have Type 1 or Type 2 diabetes there increased risk of developing pancreatic cancer – linked to pancreatic atrophy



Pancreatic Cancer and Diabetes

- New-onset diabetes can be an early warning sign of the presence of pancreatic cancer, and individuals with new-onset diabetes are a highrisk group for pancreatic cancer.
- Approximately 1% of individuals (1 in 100) diagnosed with new onset type 2 DM (T2DM) have undiagnosed pancreatic cancer. This group of individuals actually has pancreatic cancer associated DM, although it is mistakenly diagnosed as T2DM.
- Currently individuals with new-onset DM are not screened for pancreatic cancer as there are no reliable tests to distinguish between T2DM and pancreatic cancer associated DM



Diagnosis

Table 2 Proposed diagnostic criteria for type 3c diabetes mellitus

Major criteria (must be present)

Presence of exocrine pancreatic insufficiency (monoclonal fecal elas tase-1 test or direct function tests)

Pathological pancreatic imaging (endoscopic ultrasound, MRI, CT)

Absence of type 1 diabetes mellitus associated autoimmune markers

Minor criteria

Absent pancreatic polypeptide secretion

Impaired incretin secretion (e.g., GLP-1)

No excessive insulin resistance (e.g., HOMA-IR)

Impaired beta cell function (e.g., HOMA-B, C-Peptide/glucose-ratio)

Low serum levels of lipid soluble vitamins (A, D, E and K)

MRI: Magnetic resonance imaging; CT: Computed tomography; GLP-1: Glucagon-like peptide-1; HOMA-IR: Homeostasis model assessment of insulin resistance; HOMA-B: Homeostasis model assessment of beta-cell.

Issues

Lack of Awareness

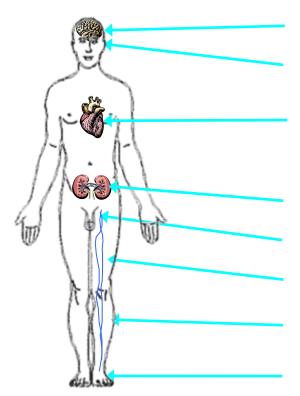
"Brittle Diabetes"

 Pancreatic Exocrine Insufficiency - absence of PERT, inadequate dosing and/or incorrect use

Undernutrition



Poor glucose control is associated with increased risk of complications



Stroke

Retinopathy and blindness

Heart disease

Kidney disease

Erectile dysfunction

Neuropathy

Peripheral vascular disease

Diabetic foot disease

Diabetes is a serious condition; there is no such thing as 'mild diabetes' or a 'touch of diabetes'



References

- Cui, Y., & Andersen, D.K. (2012). Endocrine-Related Cancer (2012) 19 F 9 F 26
 Diabetes and pancreatic cancer.
- Ewald and Hardt: Diagnosis and treatment of diabetes mellitus in chronic pancreatitis.
 World J Gastroenterol. 2013; 19(42): 7276–7281
- Ewald N, Kaufmann C, Raspe A, et al. Prevalence of diabetes mellitus secondary to pancreatic diseases (type 3c). Diabetes Metab Res Rev. 2012;28(4):338-342.
- Duggan & Conlon. A Practical Guide to the Nutritional Management of Chronic Pancreatitis. Nutrition Issues in Gastroenterology; Practical Gastroenterology. June 2013.
- Duggan S, & Conlon K,. (2017). Pancreatogenic Type 3c Diabetes: Underestimated, Underappreciated, and Poorly Managed. Practical gastroenterology. 14-23.
- National Institute for Health and Care Excellence (2018) Pancreatitis (NICE Guideline 104), Available at: https://www.nice.org.uk/guidance/ng104 [Accessed November 2022].
- UK-EDI: UK Early Detection Initiative for Pancreatic Cancer: <u>LCTC Study UK-EDI</u>

