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Discovering a slowly developing type 1 diabetes in adulthood: A case study of latent autoimmune diabetes of adulthood (LADA)

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Abstract

The purpose presenting this case study is to raise awareness about a frequently misdiagnosed form of diabetes, latent autoimmune diabetes of adulthood (LADA), to describe its clinical and epidemiological characteristics, and to compare them to those of the more common and widely known types of diabetes. Many patients diagnosed with type 2 diabetes do not meet the criteria for this category of diabetes, but also do not quite fit the criteria for type 1 diabetes. In these cases, LADA should be considered. Patients who are poorly controlled on several oral hyperglycemic agents, and need insulin in less than three years should be evaluated for LADA. Generally, the phenotypical appearance of patients with LADA is not totally consistent with type 1 diabetes, as most are over 30 years of age, have a normal to overweight body habitus and lack a history of a diabetes related emergency at time of diagnosis. Consequently, they can easily be misdiagnosed as having type 2 diabetes. Further testing, including antibody testing, and C-peptide levels can aid in distinguishing between type 2 diabetes and LADA. Treatment must be tailored for the individual patients, but the initiation of early insulin therapy can lead to better glycemic control and decrease risk of early diabetes-related complications. While there are no established guidelines for treatment of LADA, a goal of therapy is to preserve β-cell function and increase C-peptide levels. Early insulin therapy has been linked to some preservation of β-cell function, fewer episodes of hypoglycemia and decreased retinopathy.

Biography

Dr. Appel has completed her Ph.D. at the University of North Carolina at Chapel Hill and postdoctoral studies from Georgetown University and the NINR NIH. She is a Professor in the Capstone College of Nursing at: The University of Alabama in Tuscaloosa Alabama. Having been a RN for 33 years, and a NP for 18 years, Dr. Appel also maintains a clinical practice as an Acute Care and Family Nurse Practitioner within a Hospitalist group. Dr. Appel has conducted research and published in the area of cardiometabolic risk and advanced diabetes management.