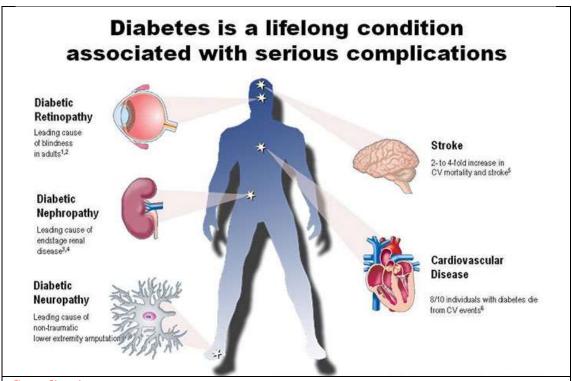
Complications of diabetes

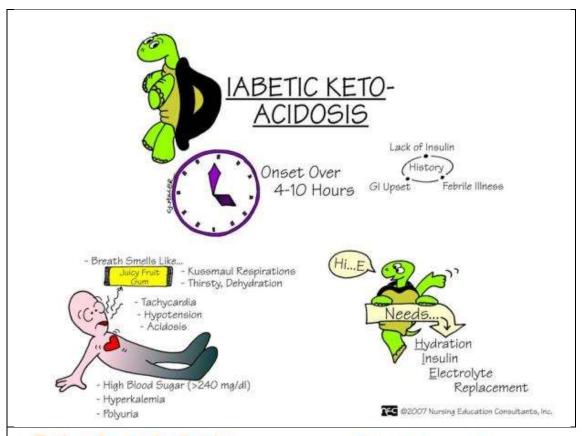


Complications

1. Coma:

(a) Diabetic (hyperglycemic) due to acidosis and dehydration

- Air-hunger,
- Cherry-red lips,
- Smell of acetone in breath,
- Softness of eye-ball,
- Flaccidity of muscles,
- Loss of deep reflexes,
- Tachycardia,
- Subnormal temperature,
- Low blood pressure,
- Leukocytosis,
- Low alkali-reserve in blood,
- Hyperglycemia,
- Polyuria,
- Sugar and ketone bodies in urine,
- Thirst,
- Weakness, and
- Loss of weight.



Polyuria, polydipsia

Enuresis

Dehydration

- Tachycardia
- Orthostasis

Abdominal pain

- Nausea
- Vomiting



Fruity breath

Acetone

Kussmaul breathing

Mental status change:

- Combative
- Drunk
- Coma

Complications of DKA

Infection

- Precipitates DKA
- Leukocytosis can be secondary to acidosis

Shock

- If not improving with fluids r/o
 MI
- Vascular thrombosis
 - Severe dehydration
 - Cerebral vessels
 - Occurs hours to days after DKA

Pulmonary Edema

 Result of aggressive fluid resuscitation

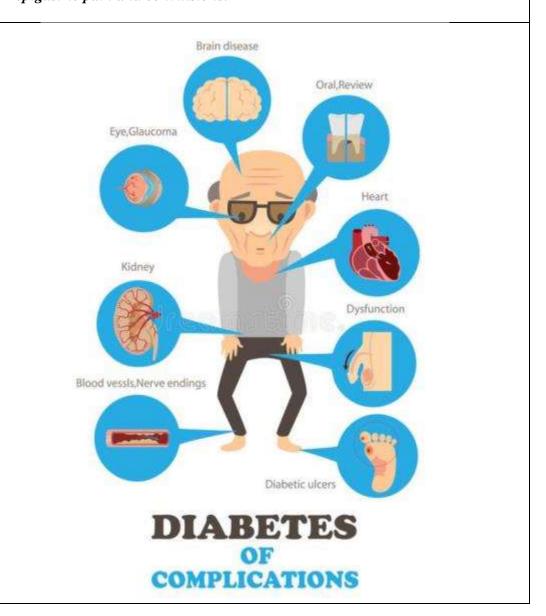
Cerebral Edema

- First 24 hours due to aggressive correction of hypoglycemia or administration of hypotonic solution
- c/p: Mental status changes
- Tx: Mannitol
- May require intubation with hyperventilation

How does a patient with DKA present? Stomach pain Rapid breating Increased pulse Flushed face Fruity breath

(b) Hypoglycemic due to overdosage with insulin

- Sweating,
- Flushing (usually),
- Abdominal discomfort,
- Headache,
- Nausea,
- Vomiting,
- Intense hunger (for food),
- Tremor and vague nervousness,
- Visual disturbances (diplopia, dimness, loss of acuity), coldness of limbs, epigastric pain and convulsions.



2. Pulmonary diseases

Such as tuberculosis and bronchitis,

3. Cardiovascular complications:

- Heart failure;
- Myocarditis;
- Infarction;
- Thrombosis on top of atheroma of blood vessels and its complications.

4. Sepsis and gangrene:

- Boils:
- Carbuncles;
- Cellulitis;
- Pruritis;
- Balanitis;
- Gangrene at legs (dry gangrene at legs (dry then moist).
- 5. Peripheral neuritis.
- 6. Cataract; diabetic retinitis; retro bulbar neuritis; optic atrophy; thrombosis of central vein: blindness; central scotoma; amblyopia.
- 7. Renal failure; chronic nephritis.
- 8. Apoplexy.
- 9. Fevers; infections; sexual dysfunction (impotence).

1. Clinically, the symptoms and signs are usually due to:

- Failure to utilize sugar:
- Its accumulation in blood → hyperglycaemia;
- Its appearance in urine → glycosuria;
- Action as diuretic → polyuria (and in children → nocturia enuresis): withdrawal of fluid from tissues → polydipsia and thirst; irritation of tissues → pruritis; non-utilization → hunger, weakness and emaciation;
- Digestive disturbances → large, dry, red and raw-beef tongue, gastritis, indigestion and diarrhoea → dehydration and dryness of skin.

2. Incomplete combustion of fat:

- The soluble intermediaries (ketone bodies, beta-hydroxybutyric acid and aceto-acetic acid) accumulate in blood → acidosis → air-hunger;
- Are excreted in urine with the fixed base (as sodium, potassium and calcium) → ketone bodies in urine; gall-stone formation; arteriosclerosis; lipemia.

3. Secondary lesions:

- Of the associated or superimposed diseased conditions.
- When diabetes is due to lack of insulin (as occurs in young thin individuals) the islets appear reduced in number and ketosis is rather common → "insulin-sensitive cases".
- When diabetes is due to diminished responsiveness to insulin → "insulininsensitive cases." (As occurs in older obese patients); the islets show no significant abnormalities and the ketosis is not eminent (does not develop so quickly).

