



## **MANAGEMENT OF TYPE 2 DIABETES IN YOUNG ADULTS**

EMBARGOED UNTIL 12:01am Monday 18 April 2022

THE first Australian consensus statement on the management of type 2 diabetes in young adults has been released, and a summary of its recommendations has been published in the *Medical Journal of Australia*.

A working group from the Australian Diabetes Society Expert Consensus Development Group examined the body of evidence and provided advice on screening, diabetes type, psychological care, lifestyle, glycaemic targets, pharmacological agents, cardiovascular disease risk management, comorbidity assessment, contraception and pregnancy planning, and patient-centred education. Special considerations for Aboriginal and Torres Strait Islander Australians are highlighted separately.

"This [statement] considers areas where existing type 2 diabetes guidance, directed mainly towards older adults, may not be appropriate or relevant for the young adult population," wrote the authors, led by Professor Jencia Wong, from the Sydney Medical School and Charles Perkins Centre at the University of Sydney, and the Royal Prince Alfred Hospital Diabetes Centre.

"Where applicable, recommendations are harmonised with current national guidance for type 2 diabetes in children and adolescents (aged < 18 years)."

Management recommendations for young adults, which differ from adults include:

- screening for diabetes in young adults with overweight or obesity and additional risk factors, including in utero exposure to type 2 diabetes or gestational diabetes mellitus;
- more stringent glucose targets (glycated haemoglobin  $\leq 6.5\%$  [ $\leq 48$  mmol/mol]);
- in the context of obesity or higher cardio-renal risk, glucagon-like peptide 1 receptor agonists and sodium-glucose cotransporter 2 inhibitors are preferred second line agents;
- $\beta$ -cell decline is more rapid, so frequent review, early treatment intensification and avoidance of therapeutic inertia are indicated;
- a blood pressure target of < 130/80 mmHg, as the adult target of  $\leq 140/90$  mmHg is too high;
- absolute cardiovascular disease risk calculators are not likely to be accurate in this age group; early statin use should therefore be considered; and
- a multidisciplinary model of care including an endocrinologist and a certified diabetes educator.

"Type 2 diabetes, traditionally a condition of older age, is becoming more prevalent in younger age groups in Australia and worldwide," Wong and colleagues wrote.



**MJA**

The Medical Journal of Australia

Media Release

"Type 2 diabetes with onset in young adulthood (nominally, 18-30 years of age) is a more aggressive condition than that seen in older age, with greater risks of major morbidity and early mortality. It is estimated that onset in young adulthood comprises 16% of the adult type 2 diabetes population globally.

"Despite a growing understanding of the excess risks and the more aggressive phenotype of type 2 diabetes in young adults compared with older adults, there is still a great need to develop a rigorous evidence base for young adults with type 2 diabetes," they concluded.

"This will further inform management recommendations and models of care for this high risk group, from which more definitive guidelines can be developed."

The full consensus statement is available at <https://diabetessociety.com.au/position-statements.asp>.

All MJA media releases are open access and can be found at:  
<https://www.mja.com.au/journal/media>

**Please remember to credit *The MJA*.**

The *Medical Journal of Australia* is a publication of the Australian Medical Association.

---

*The statements or opinions that are expressed in the MJA reflect the views of the authors and do not represent the official policy of the AMA or the MJA unless that is so stated.*

CONTACTS:

Professor Jencia Wong  
Senior Staff Specialist  
Diabetes Centre  
Royal Prince Alfred Hospital  
Email: [Jencia.Wong@health.nsw.gov.au](mailto:Jencia.Wong@health.nsw.gov.au)