Editorial

In infants, the importance of management is justified by knowledge of factors and characteristics of infantilo-juvénile diabetes epidemiology. It is interesting to describe socio-demography of infantilo-juvénile diabetes and insulin dosages profiles. In Senegal, a retrospective study has concerned 79 cases. A comparative study between subject less 18 years aged (44 cases) compared to those of more than 19 years and treated by insulin and in all cases age less than 40 years (35 cases).

An analytic study shows mean age of 18.34 ± 7.45 years for the whole population studied with respectively 18.075 ± 8.24 years for girls and 18.58 ± 6.49 years in boys. Geographical origin shows a growing gradient for mean age going from 17.56 ± 5.03 years in subjects of urban origin through 18.03 ± 6.49 years in sub-urbs to 20.45 ± 8.32 years in rural. The mean survey duration was 4.79 ± 4.98 years for the all population studied? Concerning sex, it was respectively 4.71 ± 5.54 years in boys and 4.97 ± 4.37 years in girls. A graduation exists in this survey duration that was 4.50 ± 5.25 years in sub-urbs to attain 2.81 ± 2.51 in rural. Mean regular insulin dosages used early and finally during the survey related to the body weight were for all the population studied 0.75 ± 0.28 international units kg per weight. Mean dosage was 0.73 ± 0.26 in boys and 0.77 ± 0.30 in girls. Concerning geographical origin, a graduation exists in rural that had received 0.64 ± 0.22 IU per kg of weight through 0.69 ± 0.23 IU/kg reaching to 0.79 ± 0.29 international units per kg of weight.

Concerning age group of less or equal 18 years old or more than 18 years old, a significant difference exists in mean age (13.11 ± 4.03 ; 24.77 ± 5.47), in survey mean duration (5.65 ± 5.70 ; 3.71 ± 3.59) and in mean dosages insulin international units per kg body weight (0.91 ± 0.24 ; 0.56 ± 0.22). The importance of puberty in juvenile diabetes resides in the fact that final eight depends on glycemia and microvascular complications. Micro-vasculaires. If advanced final glycation end products can be implicated justifying preventive therapeutics to create but enteroviruses role constitutes another preventive axis.