6. CONCLUSIONS

India is known as Diabetic Capital of the World. Diabetes has emerged as a major healthcare problem in India and the economic burden due to Diabetes in India is highest in the world. Type 1 Diabetes Mellitus has increased dramatically among children and with increase in obesity an increasing number of cases of T2DM are being reported in children, adolescents and young adults. The study provided an insight into the nutritional status and the diabetes management of the T1DM children who are being treated in a government and corporate hospital. High socio-economic status was found to be associated with incidence of T2DM while the incidence of T1DM was not confined to any particular socio-economic group. Early detection and treatment of Diabetes are the corner stones in reducing morbidity and mortality.

The treatment of Diabetes Mellitus requires continuous medical care and education pertaining to nutrition, lifestyle modification, and patient self management in order to prevent short term complications and decrease the risk of long term complications. It is concluded that the intervention programme helped the children in improving their quality of life and in reducing the HbA1c values, an important parameter to prevent or delay acute and long term complications related to Diabetes Mellitus. The daily insulin dose is a substantial parameter for the management of Type 1 Diabetes Mellitus in children and adolescents. Precised knowledge pertaining to carbohydrate (CHO) counting of the diet and fixing the bolus insulin dosage based on the CHO content of the meal will help in improving the HbA1c levels. In spite of educating the subjects on this aspect, they were not able to calculate the bolus insulin dosage. However, there was an improvement in blood glucose and HbA1c levels at the end of the intervention which can be attributed to the factors like changes in their dietary intake and physical activity.

*High levels of family cohesion, agreement about diabetes management responsibilities, supportive behaviors and collaborative problem-solving are associated with better regimen adherence and glycemic control. Appropriate nutritional education helps children with Diabetes to find this balance and enjoy a better quality of life.*