# Analysis of Demographic Data in Children with Diabetes Mellitus who has Visited the Office of Pediatric Endocrinology in Stara Zagora for the Period 1990-2020

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- Introduction: Type 1 diabetes mellitus (T1DM) is a disease with considerable variation in clinical presentation and progression. Epidemiological studies are the key to unravelling the still incompletely understood etiology and pathogenesis.
- Aim: To analyze demographic data (age, sex, place of residence, ethnos and age of starting of T1DM) for a period of 30 years
- Material and methods: Longitudinal study of 184 children following up in a children's endocrinology office in the city of Stara Zagora in the period 1990-2020

# Material and methods

- The analysis is a descriptive representation of patient demographics at their first office visit.
- The statistical processing was done using SPSS Statistics 26, one simple t-test, one-way ANOVA, Chi-Square tests
- Patients were divided in 3 intervals, Figure 1

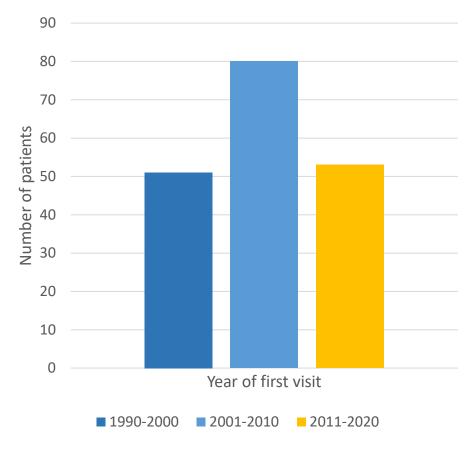


Fig.1 Number of patients presenting to the office compared to the year of first visit

# Results

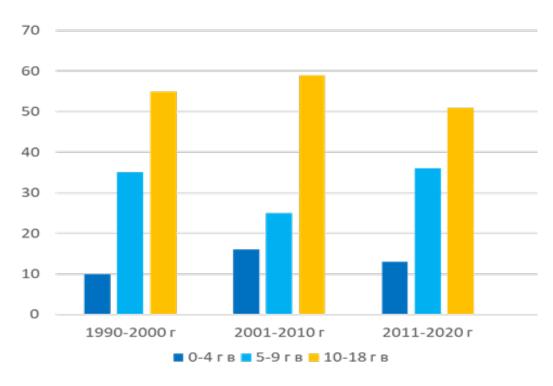


Fig.2 Distribution by age

Youngest patient presenting was 1y. 2m.

For the three time periods, patients aged 10 – 18 were more prevalent: 55-59-51%.

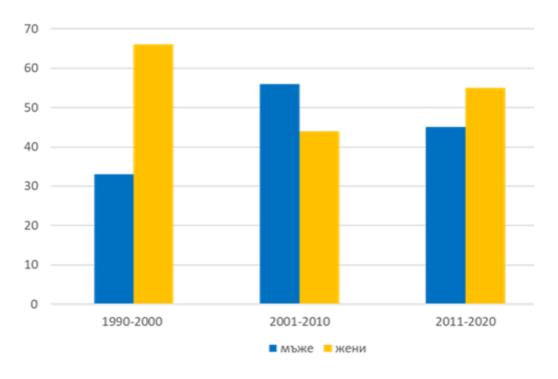


Fig.3 Distribution by gender

Results indicate that there is a dominance in the male gender(p=0.036).

#### Results

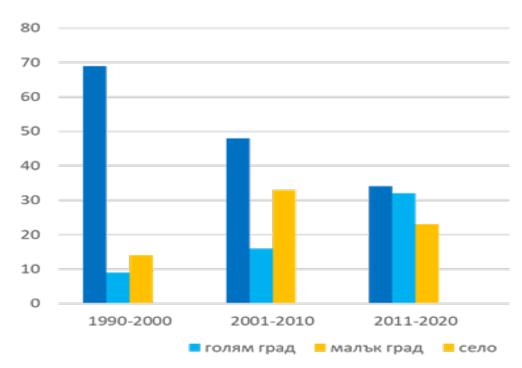


Fig.4 Distribution by places of living

In the interval 2011-2020, there was a significantly higher difference in morbidity in patients from small towns and villages compared to large cities (p=0.001).

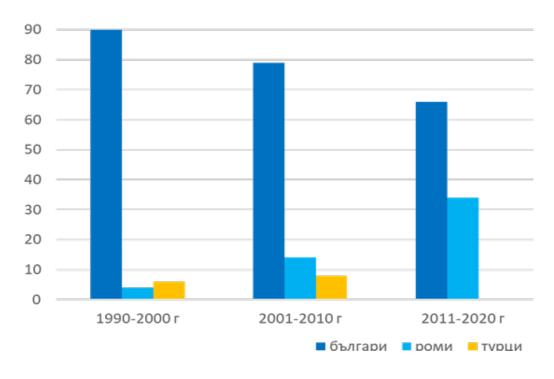


Fig.5 Distribution by ethnicity

In the interval 2011-2020 there was a significantly higher difference in morbidity in the groups of Bulgarians ethnic groups (p>0.011) compared to other ethnic groups and previous years.

# Results

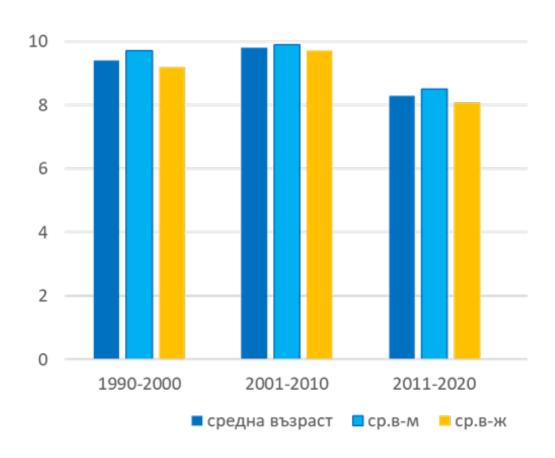


Fig. 6 Median age of onset of T1DM

In the three allocated intervals, the average age of onset of T1DM was 9.44 - 9.86 and 8.67 respectively (p=0.316).

# Discussion

 Age: Our data does not show a significant increase in T1DM in the groups up to 9year-olds, respectively the largest number of children affected by T1DM remains at school age

- Gender: T1DM affects both genders almost equally, being more common in males and more pronounced after 15 years of age. In countries with a low incidence, such as Bulgaria, it more often affects the female sex. A possible reason for the male predominance in our study is that in the largest 2001-2010 cohort, the number of males was higher.
- Place of residence: those living with T1DM in the last group 2011-2020 have practically the same distribution by place of residence. The possible reasons for this are changes in people's lifestyles - searching for and consuming ecological food, imposing a healthy lifestyle, changes in personal finances and physical activity
- Average age of onset of T1DM: School age again remains riskiest at diagnosis and longest at treatment. It is a challenge to create systematic training for health workers, teaching and non-teaching staff in schools, alongside motivation and emotional support from schools to patients and encouraging other students to a healthy lifestyle

#### Conclusion

T1DM in childhood is a serious health, social and psychological problem.

The dynamics of modern life require periodic skills improvement of medical specialists and dynamic adaptation of the legal framework concerning children's health.