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LETTER TO THE EDITOR: UNEXPECTED POOR GLYCEMIC CONTROL IN YOUNG ADULTS WITH TYPE 1 DIABETES: INSIGHTS FROM CLINICAL PRACTICE IN TURKEY

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Dear Editor,

Despite advances in diabetes care, clinical observations from our internal medicine outpatient clinic reveal a concerning trend: young adults with Type 1 Diabetes Mellitus (T1DM) often demonstrate significantly poorer glycemic control than older patients with Type 2 Diabetes Mellitus (T2DM). This unexpected pattern challenges assumptions regarding treatment adherence and health literacy in younger populations.

Turkey, as a developing country with unique sociodemographic dynamics, presents an illustrative case. Although younger individuals are generally better educated and are expected to understand and implement treatment recommendations more effectively, our clinical experience suggests that this does not necessarily translate into better disease management. In our clinic, the average HbA1c among young adults with T1DM frequently exceeds 10%, while older patients with T2DM—many of whom have limited education—typically maintain HbA1c levels between 7.0% and 8.5%.

One explanation may lie in differing perceptions of insulin therapy. While older T2DM patients often fear insulin initiation and view it as a marker of disease progression—thus making greater efforts to avoid it—T1DM patients accept insulin as an inescapable part of life. This may foster a more relaxed attitude toward glycemic control, with some patients prioritizing lifestyle flexibility and adjusting insulin doses reactively rather than adhering to structured treatment regimens.

Importantly, the ultimate goal of diabetes management transcends glycemic targets; it is the prevention of long-term complications. This objective is particularly critical in T1DM patients due to their younger age and extended disease

duration. As such, there is a pressing need to implement tailored educational strategies and psychosocial support programs focused specifically on this population.

In conclusion, addressing the unique challenges faced by young adults with T1DM is essential for improving both metabolic outcomes and quality of life. We advocate for further research and the development of patient-centered interventions to enhance adherence and long-term disease management in this vulnerable group.

Sincerely,