

Table 5: Screening for diabetes complications, dyslipidemia and hypertension in children with type 1 diabetes

Complication Indications	intervals for screening	Screening method
Nephropathy	<ul style="list-style-type: none"> Yearly screening commencing at 12 years of age in those with duration of type 1 diabetes >5 years 	<ul style="list-style-type: none"> First morning (preferred) or random ACR Abnormal ACR requires confirmation at least 1 month later with a first morning ACR and, if abnormal, followed by timed, overnight or 24-hour split urine collections for albumin excretion rate Repeated sampling should be done every 3–4 months over a 12-month period to demonstrate persistence
Retinopathy	<ul style="list-style-type: none"> Yearly screening commencing at 15 years of age with duration of type 1 diabetes >5 years Screening interval can increase to 2 years if good glycemic control, duration of diabetes <10 years and no retinopathy at initial assessment 	<ul style="list-style-type: none"> Standard field, stereoscopic colour fundus photography with interpretation by a trained reader (gold standard), or Direct ophthalmoscopy or indirect slit-lamp funduscopy through dilated pupil, or Digital fundus photography
Neuropathy	<ul style="list-style-type: none"> Postpubertal adolescents with poor metabolic control should be screened yearly after 5 years' duration of type 1 diabetes 	<ul style="list-style-type: none"> Question and examine for symptoms of numbness, pain, cramps and paraesthesia, as well as skin sensation, vibration sense, light touch and ankle reflexes
Dyslipidemia	<ul style="list-style-type: none"> Delay screening after diabetes diagnosis until metabolic control has stabilized Screen at 12 and 17 years of age <12 years of age: screen only those with body mass index >95th percentile, family history of hyperlipidemia or premature cardiovascular disease 	<ul style="list-style-type: none"> Fasting total cholesterol, high-density lipoprotein cholesterol, triglycerides, calculated low-density lipoprotein cholesterol
Hypertension	<ul style="list-style-type: none"> Screen all children with type 1 diabetes at least twice a year 	<ul style="list-style-type: none"> Use appropriate cuff size

ACR, albumin to creatinine ratio.