

Diabetes Mellitus and Dengue

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Abstract

Diabetes mellitus is a common metabolic disorder seen worldwide. It is no doubt there might be a chance that diabetes mellitus concurrently occurs with other medical problems. In tropical world, the co-occurrence of diabetes mellitus and tropical infection is interesting. In this specific editorial article, the interrelationship between diabetes mellitus and dengue is presented and discussed.

Keywords: Dengue, Diabetes mellitus, Tropical

Introduction

Diabetes mellitus is a common metabolic disorder that present with abnormal glucose metabolism. This metabolic disease is prevalent in many countries, worldwide. It is no doubt there might be a chance that diabetes mellitus might co-occur with other medical problems. In tropical world, the concurrence between diabetes mellitus and tropical infection is interesting. In this specific editorial article, the interrelationship between diabetes mellitus and dengue is summarized and discussed.

Co-occurrence between Diabetes Mellitus and Dengue

As already mentioned, there is a chance that diabetes mellitus co-occurs with dengue. The patients with underlying diabetes mellitus might get mosquito bite and develop dengue. The interesting question is on the clinical manifestation of dengue in case with underlying diabetes mellitus. In a recent report by Chen et al, it was posed that diabetes mellitus could increase severity of thrombocytopenia in dengue-infected patients [1]. Pang et al. concluded that diabetes mellitus was an important risk for multi-organ involvement in dengue [2]. A more severe

clinical spectrum of dengue is also observable in a patient with underlying diabetes mellitus [3]. Nevertheless, Htun et al. performed a meta-analysis on this specific issue and noted that there was a requirement for good systematic researching on the interrelation between diabetes mellitus and clinical presentation of dengue [4].

On the other hand, there is another interesting query regarding whether dengue can further stimulate the occurrence of diabetes mellitus. There is an extremely limited data on this clinical issue. There is an interesting report showing that dengue can induce transient diabetic ketoacidosis [5]. The pathogenesis of possible dengue induced diabetes mellitus is another interesting issue for further research in clinical diabetology.

Conclusion

There is a possibility that dengue and diabetes mellitus can concurrently occur. The clinical alteration in the concurrence case is possible. The practitioner should recognize for the possible disease combination and properly manage the patient.

Conflict of Interest

None.

References

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