

Outcomes worse for children with type 1 diabetes who are Black

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Black children with type 1 diabetes (T1D) experience disparities in

health outcomes compared with other racial and ethnic groups with similar neighborhood opportunity profiles, according to a study published online May 5 in *JAMA Network Open*.

Kelly R. Bergmann, D.O., from Children's Minnesota in Minneapolis, and colleagues assessed whether the Child Opportunity Index 2.0 (COI) scores are associated with [health outcomes](#) by race and ethnicity among children with T1D. The analysis included children (younger than 21 years) discharged with a primary diagnosis of T1D with diabetic ketoacidosis (DKA), including 72,726 patient encounters from 2009 through 2018.

The researchers found that the probability of readmission within 365 days was significantly higher among Black children with a very low COI category versus Hispanic children (risk difference, 7.8 percentage points) and White children (risk difference, 7.5 percentage points) at the same COI category. For very high COI scores, similar differences were seen for children across [racial groups](#). No associations were seen for COI and [acute kidney injury](#) (AKI) or cerebral edema, although race and ethnicity was a significant factor associated with AKI across all COI categories. For Black children, the probability of AKI was 6.8 percent versus 4.2 percent among Hispanic children and 4.8 percent among White children.

"Measures to prevent readmissions for DKA should include interventions that target racial disparities and community factors," the authors write.

One author disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#)

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