

More Indonesian children are living with diabetes—so what can we do to prevent it?

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Kintamani, Indonesia. Credit: Unsplash/CC0 Public Domain

Indonesian children under 18 were 70 times more likely to be living with diabetes in January 2023 than they were in 2010, the Indonesian Pediatric Society revealed this month.



The Indonesian Pediatric Society said that the childhood diabetes prevalence has increased from 0.028 per 100.00 children in 2010 to 2 per 100.000 children in January 2023. The authors have tried to searched for the original report, but it is not publicly available.

In addition to the Indonesian Pediatric Society data, two other peer-reviewed publications indicate that both <u>type 1</u> and <u>type 2 diabetes</u> are increasing among Indonesian children.

Both types of diabetes are chronic conditions, meaning they are long lasting and can't be cured. People with diabetes must consistently control their <u>blood sugar</u> to achieve optimal life.

Excess weight is a major risk factor for developing diabetes. It is why controlling diets is vital for preventing overweight, obesity and diabetes.

<u>The 2018 National Health Research report</u> showed that a tenth of Indonesian children between the age of 5 and 12 years old were obese.

As a researcher in infant and young child feeding, and an accredited practicing dietitian, we find that encouraging healthy family diets for children from the time they are babies is one way to keep children's blood sugar levels in check.

Preventing diabetes in children with breastmilk from birth

There are two main types of diabetes: type 1 and type 2 diabetes.

The most typical diabetes diagnosed in children is <u>type 1 diabetes</u>. It happens when the body cannot produce enough of a hormone (insulin) to regulate turning food into energy.



The cause of type 1 diabetes is unclear, though it is often considered genetic. However, <u>many studies</u> have shown <u>breastfeeding reduces the risk of type 1 diabetes</u>.

Type 2 <u>diabetes</u> can be diagnosed in children and is preventable. The risk factors of <u>type 2 diabetes</u> are also genetic.

A study <u>has shown</u> the benefit of breastfeeding in preventing <u>the risk of type 1 diabetes for babies</u>, as well as avoiding the risk of <u>type 2 diabetes across the lifespan</u>.

The first 1000 days of life significantly impact <u>child development</u>, including predicting their future diet.

WHO and UNICEF <u>recommend</u> parents initiate breastfeeding immediately after birth for at least 30 minutes, with exclusive breastfeeding from birth until six months old, complementary feeding from 6 months old and to continue breastfeeding until two years old or beyond.

After two years old, a child does not need milk, though breastmilk may still be given because it can help <u>increase a child's immunity</u>.

Avoiding high sugar Growing-Up Milk

Many parents feel that the child's nutrition is complete with Growing-Up Milk (GUM), sometimes called Toddler Milk. GUM is marketed for children aged between 12 and 36 months old.

However, an <u>Indonesian study</u> has shown that GUM tends to be high in sugar. The average <u>sugar content</u> in GUM in the Indonesian market is 7.3 grams per 100 ml (equal to the sugar in lemonade). The study echoes similar research that <u>identified high sugar content</u> in baby foods in South



Africa.

Many GUMs distributed in Indonesia claim health benefits for children. However, the sugar content in them make them inappropriate for a child's diet.

Instead of GUM, parents should give children from 6 months of age fresh and locally sourced foods. They should be prepared accordingly to the family's diet.

A wide variety of fruits, vegetables and whole grains should also be given to children. Fruits, vegetables and whole grains are rich in nutrients and are shown to be effective in preventing diabetes.

What can the government do?

The <u>government</u> should focus on promoting breastfeeding and providing <u>support</u> because breastfeeding is effective <u>in reducing diabetes risk</u>, improves <u>child immunity</u> and brings [<u>economic benefits</u>].

The government should also control the distribution and <u>marketing of breastmilk substitutes</u> and <u>GUM</u>, which can be misleading.

So far, the Indonesian government has introduced <u>labeling and</u> <u>marketing standards</u> for Growing-Up Milk, but it could do more by stopping the cross-promotion of infant formula and Growing-Up Milk.

The government should also consider a sugar tax.

The sugar tax aims to reduce sugar consumption by reducing the affordability of buying <u>sugar</u>-based products.

A systematic review has shown the effectiveness of this policy.



However, we suggest combining this policy with other interventions, such as increasing health literacy and opportunities for physical activity, particularly among children.

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