

TRACE ELEMENTS IN INSULIN DEPENDENT  
DIABETES MELLITUS (IDDM)

THESIS

Submitted for Partial Fulfillment  
of the Master Degree

1501-11

In

Pediatrics

By

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A C K N O W L E D G E M E N T

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I would like to express my deep thanks and gratitude to my advisor, my teacher and in the true sense of word my Professor Dr. Mona Salem, Professor of Pediatrics, Faculty of Medicine, Ain Shams University, for her considerable help and support during this period in which it has been my good fortune to work under her supervision.

I am extremely grateful to professor Dr. Fathi M. Tash, Professor of Biochemistry, Faculty of Medicine, Ain Shams University, for his helpful guidance and unlimited support.

A special debt of gratitude and deep appreciation is acknowledged to Dr. Mona El Samahi, Lecturer of Pediatrics, Faculty of Medicine, Ain Shams University.

I would like also to thank Dr. Mohsen El Alfi, Lecturer of Pediatrics, Faculty of Medicine, Ain Shams University for his guidance and support.

I wish to thank Professor Dr. Ahmed Abdel Karim, Professor of occupational Health, National Research Centre, Cairo, for his guidance and continuous encouragement.

I would like to thank Dr. Mostafa Kamal El Din, Lecturer of Occupational and Environmental Medicine, Department of Community, Environmental and Occupational Medicine, Ain Shams University, for supplying the statistical evaluations.

I wish to express my deep gratitude and honour to work in the Pediatric Department, Ain Shams University under the supervision of Professor Dr. Ahmed Samy Khalifa, Professor of Pediatrics, Ain Shams University.

## C O N T E N T S

	Page
- Introduction and Aim of the Work .....	1
- Review of Literature .....	3
- Insulin dependent Diabetes Mellitus .....	3
- An Introduction on Trace Elements .....	25
- Manganese and Diabetes .....	28
- Zinc and Diabetes .....	37
- Selenium and Diabetes .....	48
- Material and Methods .....	60
- Results .....	78
- Discussion .....	97
- Summary and Conclusion .....	106
- Recommendations.....	109
- References .....	110
- Arabic Summary .....	152



	Page
Table (9). Values of Blood Glucose, Total Serum Protein, Serum Albumin and Albumin/Globulin Ratio in Insulin Dependent Diabetes Mellitus Patients....	87
Table(10). Values of Blood Glucose, Total Serum Protein, Serum Albumin and Albumin/Globulin Ratio in Control Group .....	88
Table(11). Values of Serum Selenium, Zinc and Manganese in Insulin Dependent Diabetes Mellitus Patients .....	89
Table(12). Values of Serum Selenium, Zinc and Manganese in Control Group .....	90
Table(13). Values of Blood Glucose in Diabetic Patients in Comparison to the Control Group .....	91
Table(14). Values of Serum Proteins and Serum Albumin and Albumin/Globulin Ratio in Diabetic Patients in Comparison to the Control Group .....	91
Table(15). Values of Serum Selenium, Zinc and Manganese in Diabetic Patients in Comparison to the Control Group .....	92
Table(16). Correlations Between Clinical Data and Laboratory Data in Diabetic Patients ...	93

A

L I S T    O F    F I G U R E S

	Page
Figure I. Schematic Presentation of the Single Beam Atomic Absorption Spectrophotometer.....	68
Figure II. A Histogram Showing the difference in the Random Glucose Level Between Diabetic Patients and The Control Group.....	94
Figure III. A Histogram Showing the Total Serum Protein and Serum Albumin in Diabetic Patients and The Control Group.....	94
Figure IV. A Histogram Showing the difference in Serum Levels of Selenium, Zinc and Manganese Between Diabetic Patients and The Control Group.....	95

## L I S T    O F    A B B R E V I A T I O N S

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- Albumin/Globulin Ratio.	A/G Ratio.
- Atomic Absorption.	A.A.
- Copper.	Cu.
- Glutathione Peroxidase.	GSH. PX.
- Glycosylated Hemoglobin.	Hb A1C
- Insulin Dependent Diabetes Mellitus.	IDDM.
- Islet Cell Surface Antibodies.	ICSA
- Manganese.	Mn.
- National Bureau of Standards.	NBS.
- National Diabetes Data Group.	NDDG.
- National Institute of Health	NIH
- Natural Killer.	NK.
- Phenylketonuria.	PKU.
- Printer-Squencer.	PRS.
- Selenium.	Se.
- Solvent Extraction Graphite Furnace.	H.G.A.
- Superoxide Dismutase.	SOD.
- Teletypewriter Readout.	T.R.
- Volume/Volume.	V/V.
- World Health Organization.	WHO.
- Zinc.	Zn.

# INTRODUCTION AND AIM OF WORK

## I N T R O D U C T I O N

Insulin dependent diabetes mellitus (IDDM) is considered to be the commonest endocrinal disorder in childhood, here comes the importance of studying all its aspects (Porte and Halter, 1981).

There is accumulating evidence that the metabolism of several trace elements is altered in IDDM. Hence, these nutrients might have specific roles in the pathogenesis of this disease.

Increased urinary loss of zinc is a commonly encountered feature of diabetes (Tuvemo and Gebre-Medhin, 1985).

Selenium is involved in processes which protect the cell against oxidative damage by peroxidases produced from lipid metabolism.

There is very few reports about the role of selenium in diabetics (Gebre-Medhin et al, 1984).

Current knowledge does not implicate manganese in the pathophysiology of diabetes mellitus. However, its role must constitute a challenging area for further clinical research.

A I M O F T H E W O R K

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The aim of the work is to study the role of Manganese, Selenium and Zinc in insulin dependent diabetes mellitus since reports are rather deficient about their role in this syndrome.

# REVIEW OF LITERATURE

Insulin Dependent Diabetes Mellitus

I.D.D.M.

Definition

Insulin dependent diabetes mellitus (IDDM) is a syndrome characterized by sudden clinical onset of severe hyperglycemia and easy appearance of ketoacidosis and severe insulin deficiency (Gorsuch et al, 1981). It was reported that IDDM is the commonest endocrinal disorder in childhood with frequent secondary complications (Porte and Halter, 1981)and (Sperling, 1984).

IDDM defines a group of patients who are usually, but not necessarily, under 30 years of age at the time of diagnosis. They generally present with accelerating history of glucosuric symptoms for less than three months. They are thin and almost invariably exhibit weight loss. Only rarely, such patients are discovered by testing for diabetes when they are asymptomatic; if so they may decompensate soon (Fajans et al, 1976). This defines their state of absolute insulin dependency (Genuth, 1982).

A positive family history of diabetes is uncommon, only 10 percent of such patients have either a diabetic parent or a diabetic sibling (Fajans et al, 1978).