

The Mary Kathryn St. John Juvenile Diabetes Awareness Initiative

Mary Kathryn St. John



On February 1, 2009, our 6 year old daughter, Mary Kathryn, died of Sudden Onset Juvenile Diabetes (SOJD). She was an otherwise healthy child, with no family history of diabetes. When she started exhibiting symptoms that very closely mimicked stomach flu, an illness that my older son had just a month before, I thought that she had contracted the same thing. As it would turn out, she actually had type 1 diabetes. There was only about 18 elapsed hours from the time of her diagnosis until the time that she died...this is a very sudden and insidious disease of which parents need to be made aware.

This disease can typically mimic other illnesses, so a patient might present at a doctor's office with what appears to be something totally benign and unalarming, to be misdiagnosed and then present to an ER at a later date with diabetic ketoacidosis, a very serious and critical condition. It is commonly recognized and acknowledged by the medical community that first-time presentations of SOJD is in an ER setting to be immediately followed up by a stay in ICU to stabilize the patient. Most patients live, but there are others, like my daughter that do not. If your child displays any of the signs and symptoms, please do not hesitate to take them to the doctor.

~Deborah St. John
Read our story. There need never be another tragedy like the one of Mary Kathryn and our family.
www.squidoo.com/jdrf/Juvenile_Diabetes
~~Saving children one life at a time~~

Signs and Symptoms NOT to be Ignored

- **Rapid Weight Loss**- is often the most noticeable symptom.
- **Extreme thirst** – is not unusual in children, especially in warm weather. Also, once children are old enough and tall enough get water themselves it can be difficult to monitor their fluid intake.
- **Frequent urination** – this becomes more obvious to parents if traveling with children, but just around the home it can be difficult to spot.
- **Eye Sight or Vision Changes** – should not be attributed to too much time in front of the television or computer screen.
- **Sweet smelling breath**- may be noticed by parents, but can just as easily be attributed to something the child has eaten.
- **Increased appetites**- may be evident, but of course children are growing and can have large appetites.
- **Lack of energy or even drowsiness** - unless excessive, may go unnoticed. Many children now lead very sedentary lifestyles and lethargy may simply not be noticed.
- **Heavy, labored breathing** - another symptom which can be masked by any number of respiratory problems which seem to be more prevalent in children (i.e. asthma).

With Juvenile Diabetes, there **DOES NOT** have to be a family history of the disease. It strikes suddenly and without apparent warning. However, once there is a diagnosis of Juvenile Diabetes in a family, the risk to other siblings is increased and those children should be monitored.

If your child is displaying any of these symptoms, seek medical treatment immediately.