

Think Type 1 Diabetes (T1D): Why Early Detection of T1D Matters in Adults



What is T1D?



T1D is a **chronic, progressive, autoimmune disease** attacking the insulin-producing beta-cells in the pancreas¹



Presence of islet autoantibodies defines autoimmunity. Staging of disease progression is defined by glycemic status^{2,3}

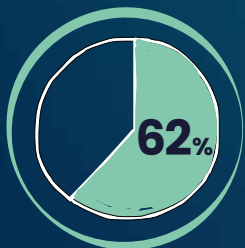


Stages 1–2 represent early-stage/preclinical T1D, whereas Stages 3–4 are clinical T1D^{2,3}

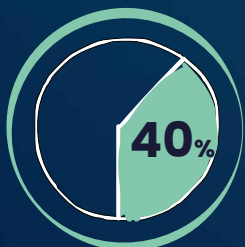


Scan the QR code on the next page to learn more about staging of T1D disease progression

Why Screen for T1D in Adults?



T1D is not just a childhood disease
~62% of new T1D diagnoses worldwide are in people ≥ 20 years old^{4*}



T1D diagnosis is often missed or not considered in dysglycemic adults. In fact, ~40% of dysglycemic adults with T1D are misclassified, usually with type 2 diabetes (T2D), due to overlapping phenotypes^{5,6}



Misclassification may delay **appropriate treatment** and lead to **serious complications**, (diabetic ketoacidosis [DKA])⁶

Early detection of T1D can:

- Ensure timely management of clinical onset
- Reduce risk of DKA at onset
- Provide an opportunity for education (including glycemic management) and counseling^{3,10}

Scan the QR code on the next page to learn more about the benefits of T1D screening

When to Consider Islet Autoantibody (IAb) Screening?

Adults may be at a higher risk of T1D compared to the general population if they have a:



Family history of T1D⁷



Personal or family history of another autoimmune condition, such as autoimmune thyroiditis or celiac disease⁷

Consider IAb testing for adults with dysglycemia (Stages 2–3)⁵
Look out for signs like excessive urination, thirst, unexplained weight loss or fatigue⁸

Also, consider use of the AABCC clinical tool and suspect T1D if:^{5†}

Age: <35 years

Body habitus: Body mass index <25 kg/m² and unintentional weight loss

Control: Poor glucose control with non-insulin therapies

Autoimmunity: Personal or family history of autoimmune diseases or syndromes

Background: Family history of T1D

Comorbidities: Treatment with immune checkpoint inhibitors can cause T1D

How do I Screen for T1D?

Take a blood sample (blood draw or finger/heel prick)[‡]

Send for IAb testing – it is recommended to test for all four IAb available (IAA, IA-2A, GADA, ZnT8A).[‡] GADA is the most common in adults^{8,9}

IAb-negative
No further testing¹¹

≥1 IAb
Refer to endocrinology team for confirmatory test¹¹

1 IAb
Results communicated. Education provided¹¹

≥2 IAb
T1D confirmed and staged.
Education provided^{7,8,11}

Access resources about:



Staging in T1D



T1D Diagnosis in Adults



Early T1D Screening Recommendations

*In 2021.^{4†}AABCC is a clinical tool for suspecting, not diagnosing, T1D; not all adults with T1D may fit into this framework.^{5 †}Follow local protocols and guidelines. Availability of testing may vary.

GADA, glutamic acid decarboxylase autoantibody; IAA, insulin autoantibody; IA-2A, insulinoma-associated antigen 2 autoantibody; IAb, islet autoantibody; T1D, type 1 diabetes; T2D, type 2 diabetes; ZnT8A, zinc transporter 8 autoantibody.

1. DiMeglio LA, et al. *Lancet*. 2018;391(10138):2449–62. 2. Insel RA, et al. *Diabetes Care*. 2015;38(10):1964–74. 3. Besser REJ, et al. *Pediatr Diabetes*. 2022;23(8):1175–8. 4. Gregory GA, et al. *Lancet Diabetes Endocrinol*. 2022;10(10):741–60. 5. American Diabetes Association Professional Practice Committee. *Diabetes Care*. 2026;49(Suppl 1):S1–371. 6. Muñoz C, et al. *Clin Diabetes*. 2019;37(3):276–81. 7. Moore DJ, et al. *Int J Gen Med*. 2024;17:3003–14. 8. Philip et al. *Diabetes Care*. 2024 ;47(11):2033. 9. Evans-Molina C, et al. *Diabetes Obes Metab*. 2025;27(Suppl 6):57–68. 10. Scheiner G, et al. *ADCES in Practice*. 2022;10(5):20–5. 11. Mathieu C, et al. *Diabetes Obes Metab*. 2026 May 18. doi: 10.1111/dom.70688. Online ahead of print.

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