

New Abbott Data Show Many People With Diabetes May Not Recognize Symptoms Of Diabetic Ketoacidosis

- Diabetic ketoacidosis (DKA) can develop quickly and is not always easy to detect early
- Ketone monitoring is not yet routine in diabetes care, which may contribute to missed warning signs of DKA and delays in intervention
- Nearly 60% of pediatric hospitalizations for Type 1 diabetes in the U.S. are associated with DKA

ABBOTT PARK, Ill., June 6, 2026 /PRNewswire/ -- Abbott (NYSE: ABT), the global healthcare leader, announced new data revealing diabetic ketoacidosis (DKA) remains an important, yet often undetected health concern for people living with both Type 1 and Type 2 diabetes. Findings from multiple Abbott studies shared at the American Diabetes Association's (ADA) June 2026 86th Scientific Sessions show sharp increases in DKA-related hospitalizations across all age groups nationwide. The data reinforces that while diabetes technology has advanced significantly, there are opportunities to better detect rising ketones before DKA develops.

Diabetic Ketoacidosis: Often Misunderstood and Difficult to Recognize

DKA develops in people with diabetes when the body does not have enough insulin and begins breaking down fat for energy, causing ketones to rise to dangerous levels in the blood.² While traditionally associated with Type 1 diabetes, DKA is increasingly affecting people with Type 2 diabetes. The American Diabetes Association notes that high ketone levels can escalate to DKA within hours and, if left untreated, can lead to coma or death.² Many people living with diabetes aren't familiar with DKA or its symptoms, despite clinical guidance recommending ketone testing during periods of elevated glucose, making it a challenge to detect early.

New DKA Data from Abbott Presented at ADA's Scientific Sessions

At the ADA's Scientific Sessions, Abbott presented findings from multiple studies analyzing hospitalization, admission diagnosis and insurance claims data to better understand how DKA may be challenging to identify, its rising impact among young people, and a growing prevalence in adults with Type 2 diabetes.

- **DKA may be hard to identify early at hospital admissions:** A study of over 100,000 people across the U.S. found that DKA can be difficult to recognize when a person first arrives at the hospital, as early symptoms – such as nausea, fatigue, or stomach pain – overlap with many common illnesses.³ A confirmed diagnosis of DKA depends on blood tests that measure blood sugar, blood pH and/or bicarbonate levels, and ketones, which may not be immediately available at admission.² These delays highlight the need for approaches to recognize DKA earlier to provide timely care.
- **Better awareness of DKA may help curb hospitalizations:** A second study of over 200,000 people showed that between 2017-2024, DKA hospitalization rates among people with Type 1 diabetes increased approximately 24%, rising from 50 to 62 cases per 1,000 individuals. The increase was more pronounced in children than adults.⁴ Most DKA events led to hospitalization for both children and adults, while severe hypoglycemia rates stayed low and stable, likely due to greater recognition of hypoglycemia and less awareness of DKA risk.⁴
- **Reducing DKA hospitalizations may improve health outcomes across all ages:** One analysis of close to 40,000 pediatric hospitalizations showed DKA now drives nearly 60% of all diabetes-related hospitalizations among youth with Type 1 or Type 2 diabetes.¹ Most U.S. hospitalizations among children with diabetes are related to DKA, with the majority requiring inpatient care lasting up to one week and costing up to \$38,000 per stay.¹ Findings from a separate study with data from millions of people indicate DKA is likely underreported in adults with Type 2 diabetes, and when diagnosed after admission as a secondary condition, is associated with longer hospital stays, higher costs, and increased rates of death.⁵

"These findings from Abbott show that diabetic ketoacidosis remains a growing challenge to identify, as DKA can develop quickly and mimic common illnesses," said Kurt Midyett, M.D., pediatric endocrinologist at Saint Luke's Endocrinology Specialists in Kansas City, Mo. "When early symptoms are misattributed, delays in diagnosis are common and often result in lengthy and costly hospitalization. This data underscores the importance of addressing gaps in recognition to help detect rising ketones before DKA develops."

The Role of Ketone Monitoring in Diabetes Care

Continuous glucose monitors (CGMs) play an essential role in helping people manage their diabetes by providing real-time glucose insights. However, they do not currently measure ketones and DKA can still develop even when glucose levels appear stable.⁶ Insights from adults living with Type 1 diabetes show that while some people understand the importance of monitoring ketones, testing is often underused. Rising ketones can progress to DKA within hours, so earlier visibility has the potential to prompt action sooner and reduce risk.⁶

"These new data make clear that preventing diabetic ketoacidosis starts with recognizing risk earlier," said Mahmood Kazemi, M.D., chief medical officer for Abbott's diabetes care business. "DKA remains one of the most preventable emergencies in

diabetes care, yet too many people still miss early warning signs when ketones levels begin to rise. These findings underscore the need for better ways to recognize risk sooner and help reduce avoidable hospitalizations."

As an alternative to existing ketone monitoring options, Abbott has developed dual glucose-ketone sensing technology, which combines continuous glucose and ketone monitoring in a single sensor designed to support both daily diabetes management and help to detect rising ketone levels for people living with diabetes. Abbott announced CE Mark for the systems, called Libre Duo and Libre Duo 10 Day, in May 2026. The company has also filed a regulatory submission with the U.S. Food & Drug Administration (FDA). Libre Duo and Libre Duo 10 Day systems are not yet cleared by the FDA or available for sale in the United States.

Frequently Asked Questions

What is diabetic ketoacidosis?

Diabetic ketoacidosis (DKA) occurs when the body doesn't have enough insulin. To get energy, the body starts breaking down fat, which releases acids called ketones into the blood. People in DKA can experience severe dehydration, dangerous changes to potassium and other electrolytes, and coma. Without prompt treatment, DKA can lead to coma or death.

Can people use urine and blood ketone monitors to test ketones?

Urine and blood ketone monitors are available, but they only offer a snapshot in time and depend on individuals or caregivers recognizing symptoms and deciding to test. Many do not check ketones regularly or lack testing supplies, which can delay action. In a [study published in the British Medical Journal Open Diabetes Research & Care](#) 64% of participants do not test for ketones at all, which can lead to rising ketones that may go unnoticed until a medical emergency develops.⁷

Can a continuous glucose monitor (CGM) provide information that helps prevent diabetic ketoacidosis?

A CGM, like the FreeStyle Libre 3 Plus sensor, can play an important role in diabetes management, but they are not designed to measure ketones. Because rising ketones are a key driver of diabetic ketoacidosis, relying on glucose data alone may not always provide an early warning before diabetic ketoacidosis (DKA) develops. Abbott has developed a dual glucose-ketone sensing technology in the U.S. that is pending FDA clearance.

About Libre:

Abbott continues to pioneer groundbreaking technology to support people living with diabetes. The company revolutionized diabetes care more than 10 years ago with its world-leading Libre continuous glucose monitoring portfolio⁸, which today is used by more than 8 million people across over 60 countries. People use Libre technology to see their glucose numbers in real-time, providing insights into how food, activity, or insulin impacts their glucose to help them make progress on their health goals. There is full or partial reimbursement for Libre systems in more than 40 countries.⁸

About Abbott:

Abbott is a global healthcare leader that helps people live more fully at all stages of life. Our portfolio of life-changing technologies spans the spectrum of healthcare, with leading businesses and products in diagnostics, medical devices, nutritionals and branded generic medicines. Our 122,000 colleagues serve people in more than 160 countries.

Connect with us at www.abbott.com and on [LinkedIn](#), [Facebook](#), [Instagram](#), [X](#), and [YouTube](#).

Important Safety Information: FreeStyle Libre 3 system is for prescription only, for Important Safety Information, please visit <https://www.freestyle.abbott/us-en/safety-information.html>.

¹ Sherr et al. Burden Of Diabetic Ketoacidosis Among Youth With Diabetes: A Hospital Claims Analysis.

² American Diabetes Association. "Planning for Sick Days." Accessed February 6, 2026. <https://diabetes.org/getting-sick-with-diabetes/sick-days>.

³ Miller et al. Characterizing the Clinical Presentation of Diabetic Ketoacidosis Hospitalizations in People with Diabetes using Admitting Diagnoses.

⁴ Trends in the Prevalence of Diabetic Ketoacidosis and Severe Hypoglycemia in Type 1 Diabetes.

⁵ Galindo et al. Mortality And Costs of Diabetic Ketoacidosis Hospitalizations in People with Type 2 Diabetes: Differences Between Primary Vs. Secondary Diagnosis.

⁶ Dhatariya, et al. *Lancet Diabetes & Endocrinology* (2025): <https://pubmed.ncbi.nlm.nih.gov/41381175/>

⁷ Hepprich, M., Roser, P., Stiebitz, S., Felix, B., Schultes, B., Schmitz, D., Rutishauser, J., Schubert, S., Aberle, J., & Rudofsky, G. (2023). Awareness and knowledge of diabetic ketoacidosis in people with type 1 diabetes: a cross-sectional, multicenter survey. *BMJ open diabetes research & care*, 11(6), e003662. <https://doi.org/10.1136/bmjdr-2023-003662>

⁸ Data on File, Abbott Diabetes Care. Data based on the number of patients assigned to each manufacturer.

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For further information: Abbott Media - Catherine Alston, Catherine.Alston@abbott.com; Abbott Financial - Michael Comilla, Michael.Comilla@abbott.com

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