

Table 2 Diagnostic criteria (2023) of slowly progressive type 1 diabetes (SPIDDM)

Required item:

- 1) the presence of anti-islet autoantibodies at some time point during the disease course ^{a)}
- 2) the absence of ketosis or ketoacidosis at the diagnosis of diabetes and the unnecessary for insulin treatment to correct hyperglycemia immediately after diagnosis in principle
- 3) gradual decrease of insulin secretion overtime, requirement of insulin treatment more than 3 months ^{b)} after diagnosis of diabetes, and exhausted endogenous insulin secretion (fasting serum C-peptide immunoreactivity < 0.6 ng/ml) at last observed time point

Judgement:

when the case fulfills the criteria all of the three described above (1), 2), and 3)), the case is diagnosed with “slowly progressive type 1 diabetes (definite)”

when the case fulfills the criteria only 1) and 2), but not 3), the case is diagnosed with “slowly progressive type 1 diabetes (probable)”

a) Anti-islet autoantibodies include glutamic acid decarboxylase (GAD) autoantibody, insulinoma-associated antigen-2 (IA-2) autoantibody, islet cell antibody (ICA), zinc transporter 8 (ZnT8) autoantibody or insulin autoantibody (IAA). The measurement of IAA should be performed before starting insulin treatment.

b) more than 6 months in typical case