Diabetic Constitution

Pancreatic - Gastric Aspecific Reflex (P. G. A. R.) mean - intense digital pression on VI thoracic dermathomere (pancreas trigger points)

Latency time (Lt) in seconds	Latency time* after preconditioning (pause of 5 sec.)	MFR in seconds (reflex duration)	dlt- fD & equilibria	EBD	Preconditioning	Diagnosis
Lt = 12 (intensity < 2cm) In post-prandium Stage	Lt = 24 [Lt = 24 if intense digital pressure – negative Siniscalchi's Sign]	3< MFR ≤4 (3.5<MFR≤4)* normal MFR, associated activation, outcome +; caecal and gastric reflex	4>fD ≥ 3 (ideal value fD=3.81) strange attractor	Normal EBD physiological function, increase of pancreas volume (Lt=2; duration=10) histangic acidosis	Type I Physiological tissue microvascular unit	Health
Lt = 12	Lt < 24 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	MFR = 4	fD ≤ 3 limit cycle	Normal, slightly modified EBD function, small number of pathological EBD	Type II Intermediate tissue microvascular unit	Diabetic Constitution
Lt < 12	Lt < 24 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	MFR ≥ 4 compromised MFR, dissociated activation, outcome ±	2<fD<3 limit cycle	Normal, slightly modified EBD function, small number of pathological EBD	Type II A Intermediate tissue microvascular unit; hyperinsulinemia-insulinresistance	Diabetes Mellitus Inherited Real Risk, Metabolic Syndrome X
9 <Lt <12	18 ≤ Lt < 24 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	4<MFR ≤ 5 growing compromised MFR, dissociated activation, outcome ±	1<fD≤2 limit cycle	Modified EBD function, increasing number of pathological EBD	Type II B Intermediate tissue microvascular unit	Diabetes Mellitus Inherited Real Risk
Lt≤9	Lt < 18 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	MFR>5 absent MFR, dissociated activation, outcome –	fD=1 fix point	Normal EBD function pathological, large number of pathological EBD	Type III Pathological tissue microvascular unit	Diabetes Mellitus

Table 1. Legend: MFR (Microcirculatory Functional Reserve); EBD (Endoarteriolar Blocking Device); fD (fractal Dimension); Lt (Latency time); dlt (differential latency time)

Natural History of type 2 Diabeyes Mellitus

Stage 1 (individual's birth)
Diabetic "and " Dislipidemic Constitutions
Diabetic Inherited Real Risk (e.g. LATENT)

Stage II (under 10 years)
Abnormal synthesis of Perivascular GAGs by fibroblasts, pericytes, mioblasts, megacariocytes, a.s.o.; Amiline in the Interstitial Fundamental Substance, and so on. (Location: Capillaries, Small Arteries, Arterioles, AVA type II, group B, cutaneous, EBD, a.s.o.)

Stage III (Second decade of life)
IIR, Microalbuminurie, Initial ATS Plaques , a.s.o.

Stage IV (about third decade of life)
Prediabetes, overt microbascular Complications.
(OGTT, Iper-Insulinemic-Normo-Glicemic Clamping, Insulinemia)

Stadio V
Type 2 overt Diabetes