

Supplementary Table 1 Ovid Medline search strategy, conducted May 11, 2021

Step	Search	Results
1	Diabetes mellitus, Type 1/ep [Epidemiology]	6836
2	Type 1 diabet*.m_title.	21313
3	Type I diabet*.m_title.	2552
4	Type one diabet*.m_title.	18
5	T1dm.m_title.	170
6	tidm.m_title.	4
7	Insulin dependent diabet*.m_title.	9991
8	IDDM.m_title.	1749
9	Latent autoimmune diabet*.m_title.	317
10	LADA.m_title.	160
11	1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10	39076
12	Incidence.	274594
13	Inciden*.m_title.	116947
14	12 or 13	327701
15	Follow-up studies/	661371
16	Cohort studies/	282979
17	Prospective studies/	582799
18	Longitudinal studies/	144732
19	Cross-sectional studies/	363349
20	15 or 16 or 17 or 18 or 19	1764024
21	11 and 14 and 20	754
22	Limit 21 to english language	696

Supplementary Table 2 Embase search strategy, conducted May 11, 2021

Step	Search	Results
1	Diabetes mellitus, Type 1/ep [Epidemiology]	1352
2	Type 1 diabet*.m_title.	39773
3	Type I diabet*.m_title.	3632
4	Type one diabet*.m_title.	52
5	T1dm.m_title.	774
6	tidm.m_title.	16
7	Insulin dependent diabet*.m_title.	12068
8	IDDM.m_title.	2061
9	Latent autoimmune diabet*.m_title.	501
10	LADA.m_title.	286
11	1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10	59004
12	Incidence.	458679
13	Inciden*.m_title.	183883
14	12 or 13	572571
15	Follow-up studies/	1268494
16	Cohort studies/	567690
17	Prospective studies/	581621
18	Longitudinal studies/	136475
19	Cross-sectional studies/	282735
20	15 or 16 or 17 or 18 or 19	2417123
21	11 and 14 and 20	690
22	Limit 21 to english language	658

Supplementary Table 3 List of countries with national registries or health surveys for which we searched for published data on T1DM in adults *indicates data found

Australia*	Iraq	Scotland*
Austria	Ireland	Singapore
Bahamas	Italy	Slovakia
Bahrain	Japan	Slovenia
Bangladesh	Latvia	Sweden
Barbados	Lithuania	Tunisia
Belgium	Malaysia	United Kingdom
Belize	Maldives	United States of America
Bermuda	Malta	Uruguay
Brazil	Mauritius	US Virgin Islands
Canada	Mexico	
Colombia	Myanmar	
Croatia	Namibia	
Czechia	Netherlands	
Denmark	New Caledonia	
Dominican Republic	New Zealand	
England	Nicaragua	
Finland*	Norway	
French Polynesia	Romania	
Germany	Russia	
Honduras	South Korea	
Hong Kong	Saudi Arabia	

Supplementary Table 4 Modified Newcastle-Ottawa Quality Assessment Scale the global assessment of adult-onset T1D incidence

Criterion	Score
Selection	
1. Representativeness of the general population (sampling frame).	
a) National population-based; e.g. national insurance or administrative data or national registry	2
b) Non-national population based; e.g. regional, population-based	1
c) Selected group e.g. patient group; employees; insured population, in a country without universal insurance/ or no description	0
2. Sample size	
a) >10,000	1
b) ≤10,000	0
3. Indication in the paper that outcome of interest (diabetes) was not present at study baseline	
a) Yes	1
b) No	0
Outcome	
1. Assessment of diabetes status/Diagnosis of T1D	
a) No description	0
b) Self-report	1
c) Record Linkage (clinical diagnosis, or ICD code)	2
d) Administrative algorithm including where two or more clinical criteria are used	3
e) Use of one or more biomarkers (e.g. Anti-GAD, other antibodies, C-peptide, genetic scores) supplemented with clinical criteria	4
2. Data capture and/adequacy of follow up of cohorts/surveys.	
a) Insurance/electronic database	2
b) Medical Records	2
c) Cohort/survey follow-up >80%	2
d) Cohort/survey follow-up 60-80%	1
e) Cohort/survey follow-up <60% or no statement	0
Comparability	
1. Is the incidence rate adjusted/standardized at least for age?	
a) Yes	1
b) No	0
Total Score	11

Supplementary Table 5 Detailed definition of T1D diagnosis and outcome assessment score for each study included in systematic review

Country (region) [reference]	Score	Description
Europe		
Belgium (Antwerp)[1]	2	Belgian Diabetes Registry
Croatia (Zagreb)[2]	3	Included on diabetes registry and present with DKA and/or be placed on insulin treatment within 1 week of diagnosis and remain on continuous insulin treatment
Denmark (Copenhagen & Furesø)[3]	3	ICD-8 codes 249.00 and 250.00 + clinical symptoms & signs, biomedical data and time of initiation of insulin treatment
Finland[4]	3	Registry based data from hospital, prescriptions and insurance databases. T1D status had to be consistent across at least two data sources, and insulin administered at diagnosis
Finland (FinDM)[5]	2	Administrative sources including hospitals, prescriptions, and insurance databases
Ireland[6]	3	At least one insulin prescription within 12 months of oral hyperglycemic, and at least one blood glucose testing strip
Italy (Pavia)[7]	2	Diagnosis on registry plus insulin prescription
Italy (Sardinia)[8]	2	Diagnosis of idiopathic diabetes stated by a physician with insulin therapy
Italy (Turin)[9]	2	Incident diabetes identified from diabetes clinics, hospital discharge data and files of subjects exempt from payment of drugs, syringes, and glucose-monitoring strips
Lithuania[10]	3	Age <34, presence of ketonuria, and the need for permanent insulin therapy within 2 weeks of diagnosis
Norway[11]	2	A person was registered as a new case of diabetes if she or he was treated in hospital with a diagnosis of diabetes mellitus for the first time within the study period and/or reported from the insurance register, and if the person was below 30 years of age at the time of diagnosis.
Norway (HUNT)[12]	4	Diabetes was identified by questionnaire and FPG anti-GAD was assayed on samples from "all diagnosed diabetic individuals"
Poland (Warsaw)[13]	2	Hospital registry data
Poland (Rzeszów)[14]	2	Hospital registry data plus diabetes and endocrinology clinics, pediatric and primary health care clinics, industrial outpatient centers, and rural health stations.
Romania (Bucharest)[15]	2	Bucharest Diabetes Registry
Russia[16]	2	The Federal DM Registry
Scotland[17]	2	Scottish Diabetes Survey 2019
Serbia[18]	2	Serbian Diabetes Registry
Slovakia[19]	2	Registration on EURODIAB TIGER and date of insulin initiation was used as date of T1D diagnosis

Spain (Catalonia)[20]	3	T1D was defined as the presence of ketonuria, and the need for permanent insulin therapy. All of the reported cases were on insulin treatment.
Spain (Navarre)[21]	4	The following diagnostic criteria for DM1 were taken into consideration: (a) positive anti-GAD and/or anti-IA2 antibodies, together with the persistent need for insulin therapy started less than 6 months after diagnosis of the disease; and (b) negative antibodies with specific characteristics referring to the onset of the disease (clinical and laboratory test data: ketosis or ketoacidosis), with the persistent need for insulin therapy started less than 6 months after diagnosis of the disease
Spain (Badajoz)[22]	3	T1D was defined as the presence of ketonuria, and the need of permanent insulin therapy. Date of diagnosis is date of insulin initiation. Excludes maturity onset diabetes and secondary diabetes
Sweden[23]	3	Type 1 diabetes was defined based on either of the following: (1) any ICD code specific for type 1 diabetes (ICD-9: 250.X1, 250.X3; ICD-10: E10) or (2) any other ICD code for diabetes (ICD-8/9: 250; ICD-10: E11-E14) combined with insulin prescription (as described below) before age 30 years. Insulin prescriptions were identified based on any medication prescription with ATC code A10A
Sweden (DISS)[24]	4	We included all individuals classified as having T1D in the DISS. Classification of the diabetes type in the DISS is based on a clinical assessment, as well as an analysis of islet cell antibodies since 1998.
Sweden (Kronoberg)[25]	4	Patients positive to any of the antibodies ICA or GADab, or with a C-peptide value <0.25 nmol/L were classified as T1D. Medical records of adults classified as type 1, and of all children and adolescents, were searched to evaluate presence of acidosis and/or ketonuria, and of early insulin treatment, defined as within 4 weeks of diagnosis of diabetes
Sweden (DISS, PDR & NDR)[26]	4	DISS includes clinical assessment and analysis of islet cell antibodies; NDR includes patients >18 with diabetes treated with insulin; PDR includes individuals receiving at least 3 prescriptions of insulin and never having received oral glucose-lowering drugs
UK (CPRD)[27]	3	Diagnosis of 1D or had been prescribed insulin and had never been prescribed oral glucose-lowering medications
UK (Biobank)[28]	4	diabetes, including age of diagnosis, insulin use within 1 year of diagnosis, and insulin use at enrolment to the study, were self-reported; plus admissions for DKA, use of genetic variants
UK (West Yorkshire)[29]	3	T1D was defined as the diagnosis given by the consultant in charge of the case, dependence on insulin from diagnosis and/or ketosis proneness. MODY was excluded

Western Pacific

Australia[30]	2	National Diabetes Insurance Scheme
China[31]	3	T1D cases ascertained from self-report from diabetes communities, and hospital and insurance registries using ICD codes of 250xx (ICD9) and E10, E08.1 (ICD10). T1D status was based on age at onset <30 and history of DKA or ketosis at diagnosis.
Hong Kong[32]	3	T1D was defined as clinical presentation with diabetic ketoacidosis and/or continuous requirement of insulin within 1 year of diagnosis.
Japan[33]	3	ICD-10 code (E10) for T1D diabetes and who were prescribed insulin and instructed to self-monitor their blood glucose.
Korea[34]	3	Korean National Health Insurance Service database: (1) at least one claim under ICD-10 code E10; (2) three or more claims for the prescription of insulin; and (3) at least one claim for prescription of insulin between 365 and 730 days after the first prescription of insulin.
New Zealand (Canterbury)[35]	2	Canterbury Diabetes Register and insulin-treatment
Taiwan[36]	2	National Health Insurance Research Database, using ICD9 codes to identify T1DM, and ≥3 outpatient visits or 1 hospitalization within a year

All Other Regions

Eritrea[37]	3	Abrupt onset of symptomatic hyperglycaemia, need for insulin replacement therapy from diagnosis, and no acanthosis nigricans.
Ethiopia[38]	2	Hospital data and insulin-requiring diabetes
Mali[39]	3	Diagnosis of T1D was a clinical assessment based on age, presentation, clinical features and immediate requirement for insulin, with no suggestion of T2D or another type of diabetes being responsible.
Iran (Fars)[40]	3	Patients who first presented with DKA, had DKA as a complication of diabetes, or were severely symptomatic with significant weight loss on any therapeutic regimen except insulin were considered to have T1D.
Libya (Benghazi)[41]	3	They were considered IDDM cases and treated with insulin if they had developed ketonuria and required insulin during the first year of diagnosis. Date of diagnosis was the date of first insulin administration for IDDM case
India[42]	2	The diagnosis of T1D was identified from the EMR using the ICD code 250.01
Rwanda[43]	3	Random blood glucose in excess of 200 mg/dl and symptoms, and required insulin therapy.

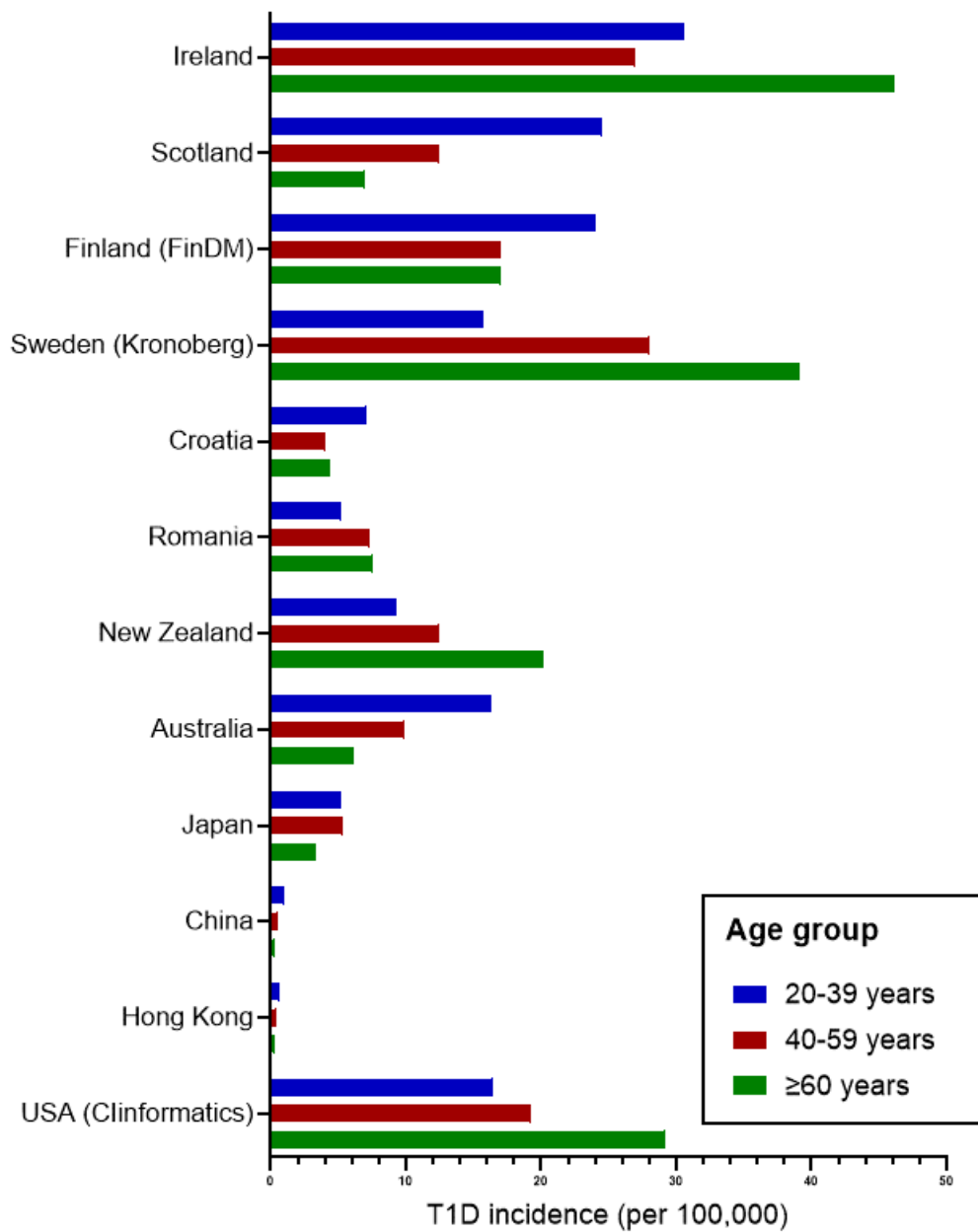
USA (Navy)[44]	2	First hospitalizations for a diagnosis of diabetes mellitus ICD-9 codes 250.0-250.9 appearing anywhere on the hospital discharge summary
USA (Clinformatics)[45]	3	At least two diagnoses for type 1 using ICD-9 AND at least one outpatient prescription for insulin
USA (California)[46]	4	T1D was defined as having diabetes (ICD codes and labs (FPG, OGTT, random glucose, HbA1c) and the presence of at least one of the four measured diabetes autoantibodies (GADA, IA-2A, IAA, or ZnT8A)

Abbreviations: ADA: American Diabetes Association; DISS: Diabetes Incidence Study in Sweden; DKA: Diabetic Ketoacidosis; DM: Diabetes Mellitus; FPG: Fasting Plasma Glucose; ICD: International Classification of Disease; IDDM: Insulin-Dependent Diabetes Mellitus; EMR: Electronic Medical Record; NDR: National Diabetes Register (Sweden); OGTT: Oral Glucose Tolerance Test; PDR: Prescribed Drug Register (Sweden); T1D: Typ1 1 Diabetes; T2D: Type 2 Diabetes

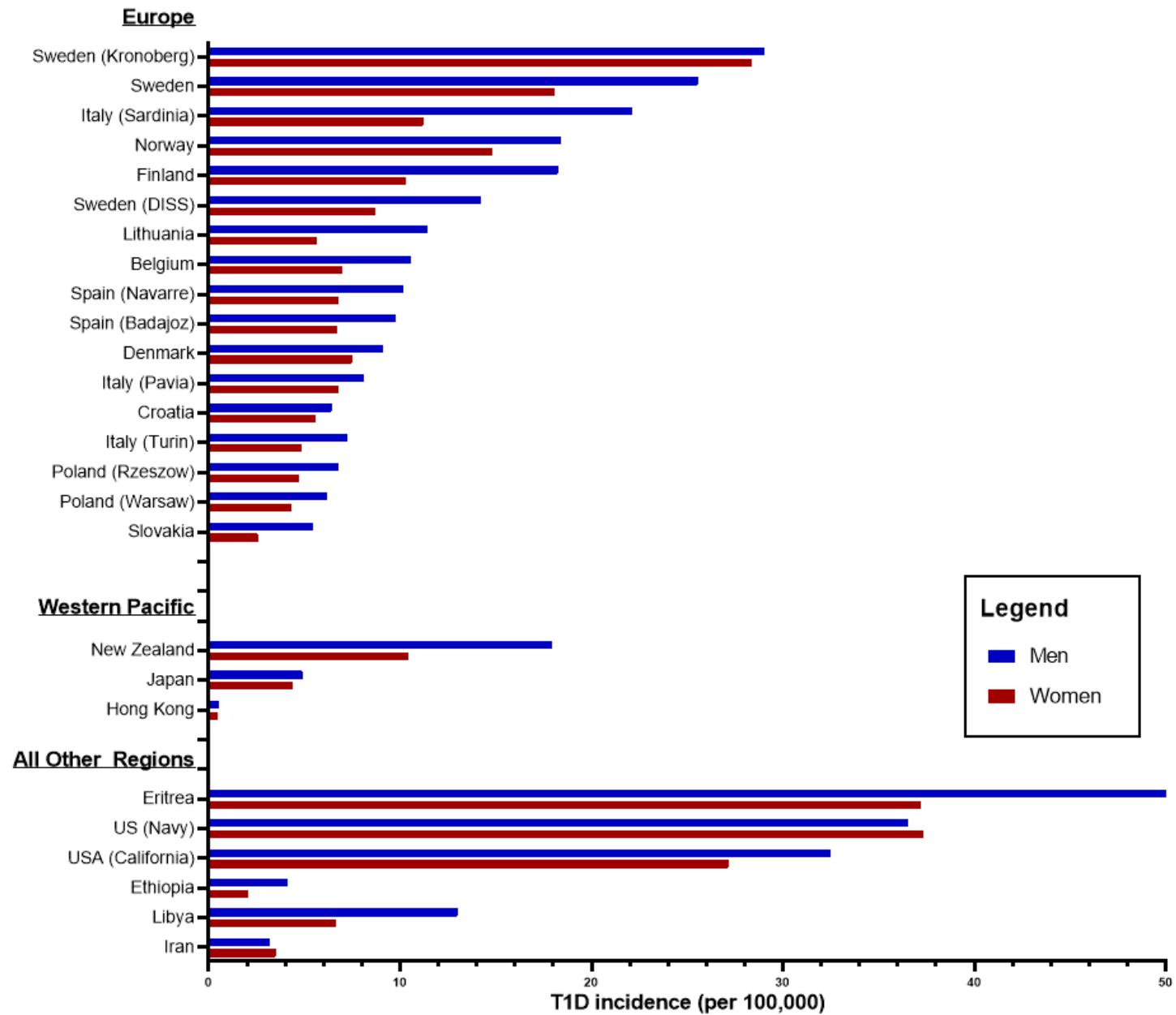
Supplementary Table 6 Newcastle-Ottawa quality assessment of included studies

Supplementary Table 3 Newcastle Ottawa quality assessment of included studies							
Study	Selection			Outcome Assessment		Comparability (/1)	Final Score (/11)
	Representativeness (/2)	Sample size (/1)	Free from outcome at baseline (/1)	Diagnosis of T1D (/4)	Data Capture (/2)		
Europe							
Belgium (Antwerp)[1]	1	1	0	2	2	1	7
Croatia (Zagreb)[2]	1	1	1	3	2	1	9
Denmark (Copenhagen & Freseriskborg)[3]	1	1	1	3	2	1	9
Finland[4]	2	1	0	3	2	1	9
Finland (FinDM)[5]	2	1	0	2	2	1	8
Ireland[6]	2	1	0	3	2	1	9
Italy (Pavia)[7]	1	1	0	2	2	1	7
Italy (Sardinia)[8]	1	1	0	2	2	1	7
Italy (Turin)[9]	1	1	0	2	2	1	7
Lithuania[10]	2	1	0	3	2	1	9
Norway[11]	2	1	0	2	2	1	8
Norway (HUNT)[12]	1	1	1	4	2	0	9
Poland (Warsaw)[13]	1	1	0	2	2	0	6
Poland (Rzeszow)[14]	1	1	0	2	2	1	7
Romania (Bucharest)[15]	1	1	0	2	2	1	7
Russia[16]	2	1	1	2	2	0	8
Scotland[17]	2	1	0	2	2	1	8
Serbia[18]	2	1	0	2	2	1	8
Slovakia[19]	1	1	0	2	2	1	7
Spain (Catalonia)[20]	1	1	0	3	2	1	8
Spain (Navarre)[21]	1	1	0	4	2	1	9
Spain (Badajoz)[22]	1	1	1	3	2	1	9
Sweden[23]	2	1	1	3	2	0	9
Sweden (DISS)[24]	2	1	0	4	2	0	9
Sweden (Kronoberg)[25]	1	1	1	4	2	1	10
Sweden (DISS, PDR & NDR)[26]	2	1	1	4	2	1	11
UK (CPRD)[27]	1	1	0	3	2	1	8
UK (Biobank)[28]	1	1	1	4	2	1	10
UK (West Yorkshire)[29]	1	1	0	3	2	1	8
Western Pacific							
Australia[30]	2	1	0	2	2	1	8

China[31]	1	1	0	3	2	1	8
Hong Kong[32]	1	1	0	3	2	1	8
Japan[33]	2	1	0	3	2	1	9
Korea[34]	2	1	0	3	2	1	9
New Zealand (Canterbury)[35]	1	1	0	2	2	1	7
Taiwan[36]	2	1	0	2	2	1	8
<i>All Other Regions</i>							
Eritrea[37]	1	1	1	3	2	0	8
Ethiopia[38]	1	1	0	2	0	1	5
Mali[39]	2	1	0	3	2	1	9
Iran (Fars)[40]	1	1	0	3	2	1	8
Libya (Benghazi)[41]	1	1	1	3	2	1	9
India[42]	0	1	1	2	2	0	6
Rwanda[43]	1	1	1	3	0	0	6
USA (Navy)[44]	0	1	1	2	2	1	7
USA (Clinformatics)[45]	0	1	1	3	2	1	8
USA (California)[46]	0	1	0	4	2	1	8



Supplementary Figure 1 Incidence of adult-onset T1D by age group and country among studies reporting T1D incidence across all age groups



Supplementary Figure 2 Incidence of adult-onset T1D by gender, and country/region

Supplementary References

1. Weets, I., et al., *The incidence of type 1 diabetes in the age group 0-39 years has not increased in Antwerp (Belgium) between 1989 and 2000: evidence for earlier disease manifestation*. Diabetes Care, 2002. **25**(5): p. 840-6.
2. Roglic, G., et al., *Incidence of IDDM during 1988-1992 in Zagreb, Croatia*. Diabetologia, 1995. **38**(5): p. 550-4.
3. Molbak, A.G., et al., *Incidence of insulin-dependent diabetes mellitus in age groups over 30 years in Denmark*. Diabet Med, 1994. **11**(7): p. 650-5.
4. Lammi, N., et al., *A high incidence of type 1 diabetes and an alarming increase in the incidence of type 2 diabetes among young adults in Finland between 1992 and 1996*. Diabetologia, 2007. **50**(7): p. 1393-400.
5. Arffman M, et al., *FinDM database on diabetes in Finland, Discussion Paper 19/2020*. 2020, Finnish Institute for Health and Welfare (THL): Helsinki, Finland.
6. Gajewska, K.A., et al., *Prevalence and incidence of type 1 diabetes in Ireland: a retrospective cross-sectional study using a national pharmacy claims data from 2016*. BMJ Open, 2020. **10**(4): p. e032916.
7. Tenconi, M.T., et al., *IDDM in the province of Pavia, Italy, from a population-based registry. A descriptive study*. Diabetes Care, 1995. **18**(7): p. 1017-9.
8. Muntoni, S. and M. Songini, *High incidence rate of IDDM in Sardinia. Sardinian Collaborative Group for Epidemiology of IDDM*. Diabetes Care, 1992. **15**(10): p. 1317-22.
9. Bruno, G., et al., *Residual beta-cell function and male/female ratio are higher in incident young adults than in children: the registry of type 1 diabetes of the province of Turin, Italy, 1984-2000*. Diabetes Care, 2005. **28**(2): p. 312-7.
10. Ostrauskas, R., et al., *The incidence of type 1 diabetes mellitus among 15-34 years aged Lithuanian population: 18-year incidence study based on prospective databases*. BMC Public Health, 2011. **11**: p. 813.
11. Joner, G. and O. Sovik, *The incidence of type 1 (insulin-dependent) diabetes mellitus 15-29 years in Norway 1978-1982*. Diabetologia, 1991. **34**(4): p. 271-4.
12. Olsson, L., et al., *Mortality in adult-onset autoimmune diabetes is associated with poor glycemic control: results from the HUNT Study*. Diabetes Care, 2013. **36**(12): p. 3971-8.
13. Wysocki, M.J., et al., *Incidence of insulin-dependent diabetes mellitus in Warsaw, Poland, in children and young adults, 1983-1988*. World Health Stat Q, 1992. **45**(4): p. 315-20.
14. Sobel-Maruniak, A., et al., *The rising incidence of type 1 diabetes in south-eastern Poland. A study of the 0-29 year-old age group, 1980-1999*. Endokrynol Pol, 2006. **57**(2): p. 127-30.
15. Ionescu-Tirgoviste, C., et al., *Epidemiology of diabetes in Bucharest*. Diabet Med, 1994. **11**(4): p. 413-7.
16. Dedov II, S.M., Vikulova OK,, *Epidemiology of diabetes mellitus in the Russian Federation: clinical and statistical report for 2016 according to the federal diabetes registry*. Diabetes Mellitus, 2017. **20**(1): p. 13-41.
17. Group, S.D.D., *Scottish Diabetes Survey*. 2019, National Health Service: Scotland.
18. Vojislav, C., et al., *Incidence trend of type 1 diabetes mellitus in Serbia*. BMC Endocr Disord, 2020. **20**(1): p. 34.
19. Kyvik, K.O., et al., *The epidemiology of Type 1 diabetes mellitus is not the same in young adults as in children*. Diabetologia, 2004. **47**(3): p. 377-384.
20. Goday, A., et al., *Incidence of type 1 (insulin-dependent) diabetes mellitus in Catalonia, Spain. The Catalan Epidemiology Diabetes Study Group*. Diabetologia, 1992. **35**(3): p. 267-71.
21. Forga, L., et al., *Incidence of type 1 diabetes mellitus in Navarre stabilized in the last eight years*. Endocrinología, Diabetes y Nutrición (English ed.), 2018. **65**(5): p. 274-279.

22. Morales-Perez, F.M., J. Barquero-Romero, and M. Perez-Miranda, *Incidence of type I diabetes among children and young adults (0-29 years) in the province of Badajoz, Spain during 1992 to 1996*. Acta Paediatr, 2000. **89**(1): p. 101-4.
23. Crump, C., J. Sundquist, and K. Sundquist, *Preterm birth and risk of type 1 and type 2 diabetes: a national cohort study*. Diabetologia, 2020. **63**(3): p. 508-518.
24. Dahlquist, G.G., et al., *Incidence of type 1 diabetes in Sweden among individuals aged 0-34 years, 1983-2007: an analysis of time trends*. Diabetes Care, 2011. **34**(8): p. 1754-9.
25. Thunander, M., et al., *Incidence of type 1 and type 2 diabetes in adults and children in Kronoberg, Sweden*. Diabetes Res Clin Pract, 2008. **82**(2): p. 247-55.
26. Rawshani, A., et al., *The incidence of diabetes among 0-34 year olds in Sweden: new data and better methods*. Diabetologia, 2014. **57**(7): p. 1375-81.
27. Abbasi, A., et al., *Body Mass Index and Incident Type 1 and Type 2 Diabetes in Children and Young Adults: A Retrospective Cohort Study*. J Endocr Soc, 2017. **1**(5): p. 524-537.
28. Thomas, N.J., et al., *Frequency and phenotype of type 1 diabetes in the first six decades of life: a cross-sectional, genetically stratified survival analysis from UK Biobank*. The Lancet Diabetes & Endocrinology, 2018. **6**(2): p. 122-129.
29. Feltbower, R.G., et al., *Type 1 diabetes in Yorkshire, UK: time trends in 0-14 and 15-29-year-olds, age at onset and age-period-cohort modelling*. Diabet Med, 2003. **20**(6): p. 437-41.
30. Australia, D., *National Diabetes Service Scheme Facts and Figures*. 2020, Australian: Canberra, Australia.
31. Weng, J., et al., *Incidence of type 1 diabetes in China, 2010-13: population based study*. BMJ, 2018. **360**: p. j5295.
32. Luk, A.O.Y., et al., *Secular trends in incidence of type 1 and type 2 diabetes in Hong Kong: A retrospective cohort study*. PLoS Med, 2020. **17**(2): p. e1003052.
33. Nishioka, Y., et al., *Incidence and seasonality of type 1 diabetes: a population-based 3-year cohort study using the National Database in Japan*. BMJ Open Diabetes Res Care, 2020. **8**(1).
34. Lee, Y.B., et al., *High Proportion of Adult Cases and Prevalence of Metabolic Syndrome in Type 1 Diabetes Mellitus Population in Korea: A Nationwide Study*. Diabetes Metab J, 2019. **43**(1): p. 76-89.
35. Scott, R.S. and L.J. Brown, *Prevalence and incidence of insulin-treated diabetes mellitus in adults in Canterbury, New Zealand*. Diabet Med, 1991. **8**(5): p. 443-7.
36. Sheen, Y.J., et al., *Trends in prevalence and incidence of diabetes mellitus from 2005 to 2014 in Taiwan*. J Formos Med Assoc, 2019. **118 Suppl 2**: p. S66-S73.
37. Mebrahtu, G., et al., *High incidence of type 1 diabetes in adolescents and young adults in Eritrea*. Diabet Med, 2021. **38**(7): p. e14544.
38. Alemu, S., et al., *Insulin-requiring diabetes in rural Ethiopia: should we reopen the case for malnutrition-related diabetes?* Diabetologia, 2009. **52**(9): p. 1842-5.
39. Sandy, J.L., et al., *Rapid increases in observed incidence and prevalence of Type 1 diabetes in children and youth in Mali, 2007-2016*. Pediatr Diabetes, 2021. **22**(4): p. 545-551.
40. Pishdad, G.R., *Low incidence of type 1 diabetes in Iran*. Diabetes Care, 2005. **28**(4): p. 927-8.
41. Kadiki, O.A., M.R. Reddy, and A.A. Marzouk, *Incidence of insulin-dependent diabetes (IDDM) and non-insulin-dependent diabetes (NIDDM) (0-34 years at onset) in Benghazi, Libya*. Diabetes Res Clin Pract, 1996. **32**(3): p. 165-73.
42. Kumar, K. and S.K. Patnaik, *A long term follow-up study from India assessing the risk of diabetes mellitus in service population*. Diabetes Metab Syndr, 2018. **12**(2): p. 87-90.
43. Marshall, S.L., et al., *Prevalence and incidence of clinically recognized cases of Type 1 diabetes in children and adolescents in Rwanda, Africa*. Diabet Med, 2015. **32**(9): p. 1186-92.
44. Gorham, E.D., et al., *Incidence of insulin-dependent diabetes mellitus in young adults: experience of 1,587,630 US Navy enlisted personnel*. Am J Epidemiol, 1993. **138**(11): p. 984-7.

45. Rogers, M.A.M., et al., *Fluctuations in the incidence of type 1 diabetes in the United States from 2001 to 2015: a longitudinal study*. BMC Med, 2017. **15**(1): p. 199.
46. Lawrence, J.M., et al., *Incidence and predictors of type 1 diabetes among younger adults aged 20-45 years: The diabetes in young adults (DiYA) study*. Diabetes Res Clin Pract, 2021. **171**: p. 108624.