

Here's our bit. Ours is a bit different, because several months passed between us noticing that his health was not good and his final diagnosis on a day when he felt 'well'.

In October 2007, I noticed that Hugh, then 11, was looking quite underweight for his age. He also started having trouble with his eating. In the mornings, he would often awake saying he felt so hungry that he felt 'sick' and it became necessary to give him something to eat the very minute he woke up. At the same time, he struggled to eat more than a small helping at meals, before again he would feel sick and uncomfortable. He started complaining of tummy ache and dyspepsia from time to time. Sometimes he would be sick immediately after a meal.

We took him along to our GP, who started running routine stool tests, blood tests etc, and when these didn't show anything conclusive, she referred Hugh to a gastroenterologist at Bristol Children's Hospital. It was early November by then and even though I have family private health insurance provided by my employer, the first appointment we were offered was 1st February. This was to be with Dr Christine Spray, who practised at a consulting room rented from the Children's Hospital.

Ironically, we could have seen Dr Spray sooner, had we been an urgent case. I turned this down, thinking that Hugh was reasonably okay and surely there were children who needed to be seen more quickly than him.

Meantime, over Christmas and New Year, we noticed that Hugh was starting to drink a lot and get up for a wee several times a night. It was a bit sporadic though and every time I started feeling concerned, it would settle back to normal for a while. Mindful of the upcoming appointment, I decided to hang on and wait to see the Consultant, rather than bother our GP again.

One morning in January, we were walking to school together with a friend and I was telling her that Hugh seemed less than well, describing the symptoms to her. Hugh piped up beside me "perhaps I have diabetes?" I gently dismissed his suggestion, although I began to suspect that he might be drinking a lot in order to emulate someone who might have diabetes – even perhaps believing himself to have got it. I thought maybe those Lloyds Chemist TV adverts had influenced him into imagining the condition!

The 1st of February was all planned out. Co-incidentally Hugh was to take part in a residential educational weekend at Kilve, 50 miles away from home, arriving on the evening of 1st February. I arranged for him to take the afternoon off school and took him down to the Children's Hospital, where David would later meet up with us and we would then go on to Kilve together to drop Hugh off.

Dr Spray asked Hugh and me a lot of questions about eating habits and how he felt etc. She examined him thoroughly and took a lot of time to discuss his symptoms with us. We more or less concluded that we needed simply to improve his diet for now and 'watch & wait' rather than start exploring his innards with invasive investigations.

Finally, just before we were leaving, Dr Spray asked Hugh about drinking. Hugh said "I do always feel like I could do with a really nice drink – even when I have just had a really nice drink!" Dr Spray suggested that if Hugh was able to provide a urine sample there and then, they would check it out.

10 Minutes later, the nurse returned brandishing a slip of paper, with his urine test result on it. I looked at her face and saw her expression. Her eyebrows were raised in surprise. I knew then that something was up.

The slip was passed to Dr Spray and there in the busy Outpatients Dept Reception Area, we were delivered the news that was to rock our lives. Hugh's glucose was very raised. The tests showed his level was 24, with no DKA (although I didn't know what that was). In a rather strange twist of fate, the consulting rooms used by Dr Spray are also the base for the children's diabetes clinic, so all the nurses were instantly aware of the position we were in and they were almost crying with us!

We were sent upstairs for some bloods to be taken and Dr Spray waited with us, comforting us whilst we waited for a Paediatric Endocrinologist to respond to a paging call.

Hugh was devastated, but only because he would have to miss the trip that he was so excited about. Hugh pulled his mobile phone out of his pocket and delivered the bad news to his totally mystified best friend, as the tears ran down his face.

Hugh's weekend case was promptly fetched from the car and he found himself admitted to the ward. David hurried to join us. Shortly after arriving on the ward, Hugh received his first injection of insulin. This signalled the beginning of a never-ending succession of finger-prick tests and injections. As the hours went by, the realisation that he had a serious condition with no way out was slowly dawning on him and us.

Three days later, Hugh emerged from the hospital, ready to start his new life as a diabetic, armed with an enormous bagful of prescription items and disability claim pack.

