

CHRONIC DISEASE BURDEN UPDATE

NATIONAL DIABETES MONTH NOVEMBER 2016

The rate of new cases of diagnosed diabetes in the United States has begun to fall, but the numbers are still very high. More than 29 million Americans are living with diabetes, and 86 million are living with prediabetes, a serious health condition that increases a person's risk of type 2 diabetes and other chronic diseases. Of the 29.1 million people with diabetes, 8.1 million are undiagnosed (27.8% of the people with diabetes).1

The Illinois Department of Public Health (IDPH) is working with community, state, and federal partners to reverse the US diabetes epidemic by tracking disease trends, focusing on prevention, identifying effective team-based care models, and improving quality of care.

Trend: Diabetes, Illinois, United States (Behavior Risk Factor Surveillance System - BRFSS) 1996 – 2016 United States United States United States

Source: America's Health Rankings. Accessed September 22, 2016. http://www.americashealthrankings.org/explore/2015-annual-report/measure/Diabetes/state/II

ILLINOIS FAST FACTS

- ❖ Approximately **1,342,070 people** in Illinois, or 12.8 percent of the population have diabetes.
- ❖ An estimated 341,000 have diabetes but don't know it, greatly increasing their health risk.
- ❖ 3,591,000 people in Illinois, 37.5 percent of the adult population, have prediabetes (blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes).
- ❖ Diabetes costs an estimated §12.2 billion in Illinois each year due to serious health complications (heart disease, stroke, amputation, endstage kidney disease, blindness – and death).
- ❖IDPH focuses its prevention and support efforts on **populations that are most affected by diabetes** to make sure they get the best education and treatment.

Source:

http://main.diabetes.org/dorg/PDFs/Advocacy/burden-of-diabetes/illinois.pdf

BRFSS Methodology: Percentage of adults who responded yes to the question "Have you ever been told by a doctor that you have diabetes?" Does not include pre-diabetes or diabetes during pregnancy.



DIABETES COMPLICATIONS

Diabetes complications and related conditions include the following:

- ❖ Heart disease and stroke: People with diabetes are twice as likely to have heart disease or a stroke as people without diabetes—and at an earlier age.
- *Blindness and other eye problems: Diabetic retinopathy (damage to blood vessels in the retina), cataracts (clouding of the lens), and glaucoma (increase in fluid pressure in the eye) can all result in vision loss.
- Kidney disease: High blood sugar levels can damage the kidneys long before a person has symptoms. Kidney damage can cause chronic kidney disease, which can lead to kidney failure.
- ❖ Amputations: Diabetes damages blood vessels and nerves, particularly in the feet, and can lead to serious, hard-to-treat infections. Amputation is sometimes necessary to stop the spread of infection.

A TRUE PUBLIC HEALTH PROBLEM

People with diabetes either don't make enough insulin (type 1 diabetes) or can't use insulin properly (type 2 diabetes). Insulin allows blood sugar (glucose) to enter cells, where it can be used for energy. When the body doesn't have enough insulin or can't use it effectively, blood sugar builds up in the blood.

People who have one or more of the following risk factors should talk to their doctor about getting their blood sugar tested:

- ❖ Being overweight.
- ❖ Being 45 years of age or older.
- Having a family history.
- Having diabetes while pregnant (gestational diabetes).

Race and ethnicity are also factors: African Americans, Hispanics, American Indians, Pacific Islanders, and some Asian Americans are at higher risk than whites.

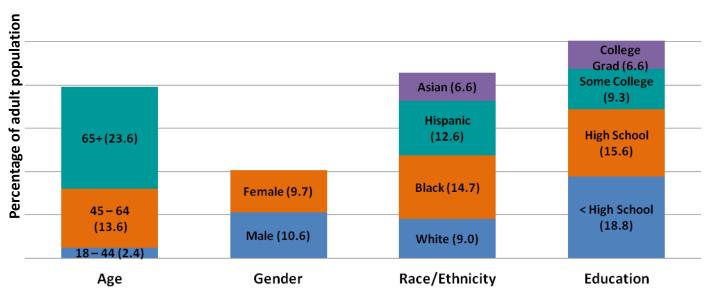


http://www.cdc.gov/diabetes



Disparities: Diabetes, Illinois

(Behavior Risk Factor Surveillance System - BRFSS) - 2015



Source: America's Health Rankings. Accessed September 22, 2016.

http://www.americashealthrankings.org/explore/2015-annual-report/measure/Diabetes/state/IL

Although hospitalizations and deaths due to chronic diseases have decreased over time, inequities persist due to differences in health risk behaviors and underlying social determinants of health, such as economic stability, community and the built environment, health care access, social and community context and education.

PREDIABETES: Opportunity for Change

More than a third of American adults – around 86 million – have prediabetes, and 90 percent of them don't know it. With prediabetes, blood sugar levels are higher than normal, but not high enough yet to be diagnosed as diabetes. People with prediabetes have an increased risk of type-2 diabetes, heart disease, and stroke. Structured lifestyle change programs such as the Centers for Disease Control and Prevention (CDC) – led National Diabetes Prevention Program (National DPP) can help people with prediabetes cut this risk sharply.

Lifestyle change programs offered through CDC's National Diabetes Prevention Program can help reduce the risk of developing type 2 diabetes by as much as 58 percent.

Source: Centers for Disease Control and Prevention. *National Diabetes Statistics* Report: Estimates of Diabetes and Its Burden in the United States, 2014. Atlanta, GA: U.S. Department of Health and Human Services; 2014.







OUR RESPONSE:

ILLINOIS DEPARTMENT OF PUBLIC HEALTH (IDPH)

IDPH's Office of Health Promotion, Division of Chronic Disease Prevention and Control works in four key areas to support the Chronic Disease and School Health (CDASH) grant: epidemiology and surveillance, environmental approaches, health care system interventions, and community programs linked to clinical services. This comprehensive approach is part of the CDC, CDASH grant and is a comprehensive approach in support of healthy choices and behaviors, making healthier options more available, and helping Illinoisans better manage their health.

To make this possible, IDPH works with partners – local health departments (LHDs), other state and federal agencies, as well as community, public health, and medical organizations.

Key activities related to diabetes within each key area include the following:

Epidemiology and Surveillance

- Collect BRFSS data annually (county level).
- Develop state-wide maps, briefs and reports.
- Collect medication adherence data (diabetes and hypertension).

Environment Approaches

• Encourage food service and nutrition standards and access to physical activity in schools, early childhood education (ECE) centers, worksites, hospitals, and community settings.

Health Care System Interventions

- Collaborate with LHDs and healthcare systems to encourage screening, testing and referral for patients with prediabetes using the American Medical Association, <u>Prevent Diabetes STAT Toolkit</u>.
- Encourage national quality reporting for patients with diabetes
- Encourage use of a multi-disciplinary approach to A1C control for patients with diabetes.

Community Programs lined to Clinical Services

- Increase links between community and clinical organizations to support prevention, self-management and control of diabetes, high blood pressure, and obesity.
- Encourage the development of Diabetes Self-Management Education and Diabetes Prevention Programs.



PREVENTION IS KEY

- ❖ Diabetes can be prevented.

 Thirty minutes of moderateintensity physical activity on most
 days and a healthy diet can
 drastically reduce the risk of
 developing type 2 diabetes.
- Healthy eating is essential for both children and adults in order to curb obesity and avoid type 2 diabetes and its many related complications.
- ❖ Supporting legislation provides Medicare coverage for the National Diabetes Prevention Program (National DPP) to eligible beneficiaries (65+).
- ❖ Efforts are underway in Illinois to improve school nutrition programs, promote healthy vending options, increase physical fitness opportunities and develop appropriate screening programs in schools and worksites.

http://www.diabetes.org/advocacy/advocacy
-priorities/prevention/

To learn more visit us at:

http://www.dph.illinois.gov/

