

New & News in Diabetes Policy

GOVERNMENT AFFAIRS & PUBLIC POLICY

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"Courage is going from failure to failure without losing enthusiasm."

-Winston Churchill,
British Prime Minister

Uninsured Pre-Medicare Adults Face Significant Challenges Accessing Care

Ultimately these uninsured adults age 55 to 64 will enter the Medicare program, where chronic health conditions such as diabetes are the driver of costs.

A Kaiser Family Foundation (KFF) analysis shows that adults age 55 to 64 without insurance had difficulty getting affordable, accessible care in 2010. According to the brief, four in 10 of these adults reported delaying treatment or having health care needs that were not met. Another three in 10 reported having trouble paying their medical bills, largely because of cost.¹

Some 36% of pre-Medicare age uninsured adults reported their health as being only poor or fair compared to 23% of adults age 55 to 64 with insurance. In addition, nearly one-third of these adults reported being unable to afford prescription drugs that they needed. Minority populations are over-represented among these uninsured adults age 55 to 64. For example, 23% are

Hispanic compared to just 5% of adults age 55 to 64 with insurance.² Diabetes disproportionately affects the Hispanic population.³

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Type 1 and Type 2 Diabetes Increasing In Youth

Findings from the SEARCH for Diabetes in Youth study presented at the American Diabetes Association Scientific Sessions in June show a 23% rise in type 1 diabetes and 21% increase in type 2 diabetes among children

and adolescents from 2001 to 2009. "This is frightening," said Robert E. Ratner, MD, chief scientific and medical officer for the American Diabetes Association. "These are harbingers of adult health problems. If the trend is not reversed,

there could be an epidemic on heart disease, stroke and kidney failure when this generation is 25 to 35."⁵

» [Learn more about the study here.](#)

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Uninsured Pre-Medicare Adults Face Significant Challenges Accessing Care

Ultimately these uninsured adults age 55 to 64 are entering the Medicare program, where chronic health conditions such as diabetes are the driver of costs.⁴

» [Access the KFF brief here.](#)

Cardiovascular Risk Factors Also Increasing Among Youth

The most prevalent risk factor for cardiovascular disease among US adolescents is obesity and being overweight; however prediabetes is also on the rise. A recent study published in the June 2012 issue of *Pediatrics* looked at NHANES data (which is an annual survey of the health and nutritional status of approximately 5,000 Americans) for 1999 through 2008 and found that the prevalence of prediabetes increased from 9% among youth ages 12 to 19 in 1999-2000 to 23% in 2007-2008.⁶



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Obesity and Diabetes Trends—High and Still Rising

The CDC released its early findings from the 2011 National Health Interview Survey revealing that while Americans are exercising more and smoking less, Americans are more obese than ever. The number of Americans over age 20 that self-reported obesity rose to 28.7% in 2001 from 19.4% in 1997.⁹ Rates of obesity are higher for African Americans

(males-34.6%; females-44.5%) than for Hispanics (males-31.8%; females-33.1%) or whites (males-28.1%; females-25.2%). Interestingly enough, only a small percentage of the U.S. population, 2.4%, described their own personal health as “poor”. Additionally, the survey found that one in five adults aged 65 and older has diabetes, while one in

ten adults aged 45 to 54 has diabetes. Even though more adults are obese, the percentage of adults who report meeting federal physical activity guidelines increased from just over 40% in 1998 to nearly 50% in 2011.¹⁰

» [More information on the survey and data is available here.](#)

"To get ahead of this problem, we have to be incredibly aggressive and look at children and adolescents and say you have to make time for physical activity ... because stress on the pancreas and insulin resistance catches up with people. We are truly in deep trouble. Diabetes threatens to destroy the health care system."⁸

- Pediatric endocrinologist Larry Deeb, former president of medicine and science for the ADA, quoted in *USA Today* about the Pediatrics article

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Cardiovascular Risk Factors Also Increasing Among Youth

The prevalence of prediabetes was significantly higher among overweight and obese teens.

The study authors conclude: “Adolescence represents a window of opportunity for assessment of cardiovascular disease risk factors and the promotion of lifestyles that will affect the development and progression of cardiovascular disease.”⁷

» [Access the study abstract here.](#)



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Sedentary Lifestyle Linked To Disease and Death

About 5 million people died in 2008 from diseases related to a sedentary lifestyle,¹¹ and about 1.5 billion people worldwide do not get recommended amounts of physical activity¹², according to a series of studies published online in *The Lancet* on July 18, 2012.¹³ About one-third of adults and four-fifths of adolescents

do not achieve public health guidelines for recommended levels of physical activity.¹⁴ Inactivity is a risk factor comparable to smoking or obesity, researchers said, and is estimated to cause 10% of colon and breast cancers, 7% of type 2 diabetes cases and 6% of heart disease cases.¹⁵ More than 500,000 lives

could be saved each year if inactivity were reduced by 10%, researchers said.¹⁶

» [Access the online series here.](#)



More US Adults Are Walking

Regular physical activity can help individuals maintain a healthy weight and prevent a variety of chronic diseases, including type 2 diabetes. The 2008 Physical Activity Guidelines for Americans, published by the US Department of Health and Human Services, recommend that adults engage in at least 150 minutes of moderate-intensity aerobic physical activity weekly, such as brisk walking. Walking is, in fact, the most commonly reported physical activity by US adults.¹⁷

Using data from the 2005 and 2010 National Health Interview Surveys, the CDC assessed changes in prevalence of walking by sex, race/ethnicity, education, body mass index category, geographic region, and physician-diagnosed chronic disease. The study showed that overall, walking prevalence increased significantly from 55.7% in 2005 to 62.0% in 2010.¹⁸ Significantly higher walking rates were observed across nearly all demographic and health characteristic categories.

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Type 2 Diabetes and Higher Risk of Pancreatic Cancer

Type 2 diabetes is associated with an increased risk of developing pancreatic cancer according to a study published online June 25th in *Diabetes, Obesity & Metabolism*. Researchers looked at the electronic health records of

patients in the UK General Practice Research Database and found that the odds of developing pancreatic cancer increased by 80% in people with type 2 diabetes.¹⁹ Older age, tobacco use and chronic pancreatitis were also

identified as risk factors. In fact, people with type 2 diabetes and chronic pancreatitis were 12 times more likely to develop pancreatic cancer.²⁰

» [Access the study abstract here.](#)

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More US Adults Are Walking

To sustain these increases, communities need to offer safe, accessible places for physical activity.

» [Access the full study findings in the August 12 MMWR here.](#)

Exposure to Secondhand Smoke Increases Type 2 Diabetes Risk

Data on more than 6,300 U.S. adults show that those exposed to secondhand smoke had higher rates of type 2 diabetes and obesity. The study, presented at the Endocrine Society Annual Meeting, looked at findings from the National Health and Nutrition Examination Survey (NHANES) from 2001 to 2006.

The researchers noted that higher measures of insulin resistance, fasting blood glucose and A1C levels were also found in individuals exposed to secondhand smoke.

» [Access the study abstract here.](#)

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People with Type 2 Diabetes Not Taking Their Medications as Prescribed

Findings from a global survey funded by Novo Nordisk show that one in four people with type 2 diabetes who use insulin missed taking a dose of insulin or took less than prescribed in the previous 30 days. Some 22% missed a dose, 24% mistimed a dose by more than two hours and 14%

reduced a dose.²¹ In addition, results from the GAPP2™ survey, reveal that for people with type 2 diabetes hypoglycemia remains a common concern: 36% of those interviewed reported a hypoglycemic event in the previous 30 days. Individuals who reported not taking insulin as prescribed were significantly

more likely to also report suffering from hypoglycemia (41% reported hypoglycemia vs. 34% of people taking their insulin as prescribed).²²

» [More information on the GAPP2™ findings, presented at the American Diabetes Association 72nd Scientific Sessions in June, can be found here.](#)

Health Systems Form Diabetes Registry

Eleven integrated health systems, with more than 16 million members, combined de-identified data from their electronic health records to form the largest private sector diabetes registry in the nation, containing information on more than 1 million individuals with diabetes. The registry, known as the SUPREME-DM DataLink (Surveillance, Prevention and Management of Diabetes Mellitus DataLink), provides a unique and powerful resource to

conduct population-based diabetes research and clinical trials. The average age of individuals upon entry into the registry was approximately 56 years old and 48% were female.

» [For more information on the diabetes registry, click here.](#)



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Prediabetes: Reducing Blood Glucose Levels, Even Temporarily, Reduces Diabetes Risk

According to a study published online in *The Lancet* in June 2012, people with prediabetes are significantly less likely to develop type 2 diabetes if their blood glucose levels are reduced to normal levels in a timely manner. Researchers from the Colorado School of Public

Health and the University of Colorado School of Medicine found that individuals at a high risk for type 2 diabetes who experience a period of normal glucose regulation are 56 percent less likely to develop the disease 10 years later regardless of how they reduced their

glucose levels and even if the reduction was only temporary.²³ The study examined data from the Diabetes Prevention Program Outcomes Study.

» [Access the study abstract here.](#)

Congressional Budget Office: Medicare and Medicaid Spending To Grow

A recently released CBO report shows that federal Medicare spending will grow from 3.7% of GDP in 2013 to 4.3% in 2022. Medicaid spending will rise from 1.7% in 2013 to 2.4% in 2022. Overall, the three largest mandatory spending programs — Medicare, Medicaid and Social Security — will grow to 12.2% of GDP in 2022, representing 55% of all federal spending.

» [More information is available here.](#)

AHRQ Brief on Access to Care

A recent Agency for Healthcare Research and Quality (AHRQ) Statistical Brief examined the level of patient-centered care delivered in the US by income and insurance status. The study results showed that poor and low-income Americans are more likely than others to report that their health care provider who is their usual source of medical care did not usually or never showed respect for their treatment preferences, nor asked them to share in making decisions about treatment options.²⁴ In addition, individuals with public insurance coverage or no insurance were also more likely to report the same kind of non-patient-centered care.

» [Access the Statistical Brief here.](#)

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State-By-State Obesity Data

A new analysis by the Robert Wood Johnson Foundation (RWJF) and Trust for America's Health (TFAH) using CDC data for 2011 reveals that 12 states have obesity rates above 30% (Alabama, Arkansas, Indiana, Kentucky, Louisiana,

Michigan, Mississippi, Missouri, Oklahoma, South Carolina, Texas, and West Virginia). State obesity rates range from 20.7% in Colorado to 34.9% in Mississippi. No state had a prevalence of adult obesity less than 20 percent. The South had

the highest prevalence of adult obesity (29.5%), followed by the Midwest (29%), the Northeast (25.3%) and the West (24.3%).

» [Learn more from the RWJF press release.](#)

Diabetes Death Rates Drop

CDC research shows that during the period 1997-2006, death rates for people with diabetes dropped substantially. The study, published in *Diabetes Care*, indicates that among adults with diabetes, the cardiovascular disease-related death rate dropped by 40% and deaths from all causes decreased by 23%.

» [Access the study abstract here.](#)

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