



*The Diabetes Epidemic Among Hispanic and Latino Americans**

WHAT IS DIABETES?

- Diabetes is a chronic disease in which the body does not produce or properly use insulin, a hormone that is needed to convert sugar, starches, and other food into energy. It is associated with long-term complications that may affect a person's quality of life and is the leading cause of adult blindness, end-stage kidney disease, and amputations of the foot or leg due to nerve disease.
- Diabetes is one of the leading causes of death and disability in the United States. In 2002 the total cost (direct and indirect) of diabetes was \$132 billion.

WHAT ARE THE DIFFERENT TYPES OF DIABETES?

- **Type 1 diabetes** (formerly called juvenile diabetes) results when the body's immune system attacks and destroys its own insulin-producing beta cells in the pancreas. People with type 1 diabetes need daily injections of insulin to live. Symptoms of type 1 diabetes – increased thirst and urination, constant hunger, weight loss, blurred vision, and extreme fatigue – usually develop over a short period of time. If type 1 diabetes is not diagnosed and treated, a person can lapse into a life-threatening coma.
 - A small number of Hispanic Americans with diabetes (about 5 to 10 percent) have type 1 diabetes, which usually develops before age 20 and is always treated with insulin.
- **Type 2 diabetes**, (formerly called adult-onset diabetes) occurs when the body doesn't make enough insulin or cannot use the insulin it makes effectively. The symptoms of type 2 diabetes – feeling tired or ill, unusual thirst, frequent urination especially at night, weight loss, blurred vision, frequent infections, and slow-healing wounds – develop gradually and are not as noticeable as in type 1 diabetes.
 - This form of diabetes usually develops in adults over age 40 but is becoming more prevalent in children and adolescents.
- **Gestational diabetes** develops during pregnancy. This type of diabetes disappears when the pregnancy is over, but women who have had gestational diabetes have a greater risk of developing type 2 diabetes later in their lives.

HOW MANY HISPANIC AND LATINO AMERICANS HAVE DIABETES?

- Of the 30 million Hispanic/Latinos living in the United States, about 8.2% or 2 million have been diagnosed with diabetes. On average, Hispanics/Latinos are almost 1.5 times as likely to have diabetes as non-Hispanic whites of similar age.
- Diabetes is particularly common among middle-aged and older Hispanic Americans. For those aged 50 or older, about 25 to 30 percent have either diagnosed or undiagnosed diabetes. The disease is twice as common in Mexican-American and Puerto Rican adults as in non-Hispanic whites.
- As in all populations, having risk factors for diabetes increases the chance that a Hispanic American will develop diabetes. Risk factors for diabetes seem to be more common among Hispanics than non-Hispanic whites and they include: being part of an ethnic group, a family history of diabetes, gestational diabetes, impaired glucose tolerance, obesity, and lack of physical activity.

HOW DO DIABETES-RELATED COMPLICATIONS AFFECT HISPANIC AND LATINO AMERICANS?

- The results of three studies on Hispanic and Latino Americans showed that the severity of diabetes--as indicated by insulin use, higher glucose levels, and more years since diagnosis--was significantly associated with diabetes retinopathy.
- Diabetes is the leading cause of kidney failure (nephropathy) in the United States. The San Antonio Heart Study showed that the prevalence of clinical evidence of kidney damage (proteinuria) was more frequent in Mexican Americans with diabetes than in non-Hispanic whites.

WHAT IS THE LINK BETWEEN CARDIOVASCULAR DISEASE AND DIABETES?

- Cardiovascular disease is the leading cause of death for people with diabetes accounting for about 65 percent of all deaths. And yet, only one in four Hispanics/Latinos with diabetes know they are at risk for heart disease.
- People with diabetes are 2 to 4 times more likely to have heart disease or suffer a stroke than people without diabetes.
- Middle-aged people with type 2 diabetes have the same high risk for heart attack as people without diabetes who already have had a heart attack.
- About 73 percent of people with diabetes also have high blood pressure.
- Smoking doubles the risk for heart disease in people with diabetes.

WHAT CAN HISPANIC AND LATINO AMERICANS DO TO PREVENT HEART DISEASE OR STROKE AND OTHER DIABETES COMPLICATIONS?

- Diabetes is a self-managed disease. People with diabetes must take responsibility for their day-to-day care.
- The chances of having diabetes complications can be reduced or delayed significantly by keeping blood sugar, blood pressure, and cholesterol levels in the target range. The NDEP recommends the following targets for reducing risk of heart disease and stroke for people with diabetes (called the *ABCs of Diabetes*):
 - **Blood sugar**.....< 7 percent (check at least twice a year)
 - **Blood pressure**.....< 130/80 mmHg (check every doctor's visit)
 - **Cholesterol (LDL)**.....< 100 mg/dl (check once a year)
- People with diabetes can manage their disease by eating the right amounts of a variety of healthy foods – vegetables & whole grain – getting regular physical activity, taking diabetes medicine as prescribed, and testing blood sugar levels.
- Community education and support programs can help people with diabetes and their families to manage their diabetes.

CAN TYPE 2 DIABETES BE PREVENTED?

- YES! The Diabetes Prevention Program (DPP), an important trial sponsored by the National Institutes of Health, proved that type 2 diabetes can be delayed or prevented in people with pre-diabetes. Pre-diabetes is a condition where blood sugar levels are higher than normal, but not yet high enough for a diagnosis of diabetes.
- Risk factors for pre-diabetes include being overweight, having a family history of diabetes, high blood pressure and cholesterol, and being part of a racial or ethnic high risk group, including Hispanic.
- Over 500 Hispanics participated in the DPP. More than 15 percent of all DPP participants were Hispanic/Latino. Two out of every three Hispanics in the DPP were able to delay or prevent the onset of diabetes. To prevent diabetes, DPP participants:
 - Lost 5 to 7 percent of their body weight. That's 10 to 15 pounds in a person that weighs 200 pounds.
 - Were physically active for 30 minutes a day, 5 days a week. Most participants chose brisk walking.
 - Made healthier food choices and limited the amount of fat in their diet.

WHERE CAN I GO FOR MORE INFORMATION?

For more information about preventing and controlling diabetes, call **1-800-438-5383** or visit the National Diabetes Education Program's website at www.ndep.nih.gov.

* Adapted from National Diabetes Fact Sheet: General Information and national estimates on diabetes in the United States, 2003. Bethesda, MD. National Institute of Diabetes and Digestive and Kidney Diseases, NIH., 2003 and Diabetes Overview and Diabetes in Hispanic and Latino Americans, National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health