

Diet and Diabetes

Summary of Significant Trends:

Diabetes was the fifth leading cause of death in North Carolina in 2001.¹ It is a major contributor to deaths from cardiovascular disease. It is the leading cause of blindness, renal failure and non-traumatic amputations. Each day, diabetes causes about 15 deaths, eight leg and foot amputations, and more than 600 hospitalizations for treatment or surgery for heart problems or stroke complications or poor circulation in the extremities.²

In 1998 diabetes was responsible for 14% of all hospitalizations, costing approximately \$1.5 billion, with approximately \$645 million coming from secondary complications of diabetes such as cardiovascular disease, amputation, and renal failure.²

Although studies have shown the importance of maintaining tight control of blood glucose levels to prevent deleterious effects of diabetes, in 1999 only 53% of NC adults with diabetes monitored their blood glucose level daily and only 71% monitored their blood glucose at least once a week.

Males have a lower rate of diagnosed diabetes (5.6%) than females (6.7%). Diabetes is approximately 57% more common among Blacks than Whites. Blacks are approximately three times as likely to die from diabetes as

Whites. One in five Blacks over the age of 65 has diabetes.² Native Americans are more likely to have diabetes than other races and diabetes is on the rise in the Cherokee.

Emerging Trends and Issues:

The aging of North Carolina's population is likely to increase the incidence of diabetes in North Carolina as diabetes is more common among people over age 60. On the other end of the life cycle, Type 2 diabetes is becoming common among elementary school age Cherokee children.

One very exciting study, the Diabetes Prevention Program, is the first major trial to show that diet and exercise can effectively delay diabetes in a diverse American population of overweight people who have blood glucose levels higher than normal but not yet at the level of full-blown diabetes. Lifestyle intervention worked as well in males and females and in all the ethnic groups. It also worked well in people age 60 and older, reducing the development of diabetes in this group by 71 percent. In view of the rapidly rising rates of obesity and diabetes in America this is good news.³

Relevance of Trends to County Programs:

Proper diet and exercise can prevent and control diabetes. The North Carolina Cooperative Extension Service is prepared to educate and disseminate reliable, non-biased, research-based information to all North Carolinians to lower their risk of diabetes through diet and lifestyle change. Programs available include: Dining with Diabetes.

References

1. North Carolina Center for Health Statistics
www.schs.state.nc.us/schs/
2. Healthy Carolinians 2010 Objectives. 2001
www.healthycarolinians.org
3. Diet, Exercise delay Type 2 Diabetes, FDA Consumer Magazine, September-October, 2001

Other Resources

National Heart, Lung, and Blood Institute;
www.nhlbi.nih.gov

The American Diabetes Association;
1-800-DIABETES; www.diabetes.org

National Center for Health Statistics;
www.cdc.gov/nchs/fastats/diabetes.htm

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