



# California Diabetes Program California Department of Public Health

2011 Fact Sheet

*The mission of the California Diabetes Program is to prevent diabetes and its complications in California's diverse communities.*

California's most vulnerable populations need a centralized voice to identify and promote best practices, influence and focus research efforts, mobilize diabetes advocates, and establish urgency about the diabetes epidemic. To address these needs, California Diabetes Program activities fall into five categories: Surveillance, Communications, Policy/Advocacy, Engaging with Community and Health Care Systems, and a special English-as-a-second-language diabetes prevention project.

The California Diabetes Program was established in 1981 as a partnership between the California Department of Public Health and the University of California, San Francisco and is funded primarily by the Centers for Disease Control and Prevention (CDC).

## **Types of diabetes**

Diabetes is a chronic medical condition marked by high levels of blood glucose (a form of sugar) resulting from defects in insulin production, insulin action, or both. (1)

- **Type 1 diabetes**, previously known as juvenile diabetes, is an autoimmune disease in which the body does not produce the hormone insulin. There is no known way to prevent type 1 diabetes.
- **Type 2 diabetes**, previously known as adult-onset diabetes, is a metabolic disease in which the body does not make enough insulin or use it effectively. Type 2 diabetes can be prevented or delayed by maintaining a healthy weight, losing at least 5-7 percent of body weight if overweight, and exercising regularly.
- **Gestational diabetes** occurs in pregnant women who have never had diabetes before but have higher than normal blood glucose levels during pregnancy. Without intervention, about 1 in 2 women who have gestational diabetes will develop type 2 diabetes within 5-10 years after giving birth. (1)
- **Prediabetes** is a condition that raises the risk of developing type 2 diabetes, heart disease, and stroke. People with prediabetes have blood glucose levels higher than normal but not high enough to be classified as diabetes. Without intervention, about 1 out of 4 people with pre-diabetes will develop diabetes within 3-5 years. (2)

**Diabetes is the leading cause of blindness, amputations, and kidney failure**, and is a **major contributor to heart attacks and strokes**. (1) Overall, the risk for death among people with diabetes is about twice that of people of similar age without diabetes. (1) **Diabetes reduces life expectancy** by eighteen years if diagnosed at age 20, fourteen years if diagnosed at age 40, and ten years if diagnosed at age 60. (3)

### **KNOW THE RISK FACTORS FOR TYPE 2 DIABETES: both genetic and environmental**

- Having prediabetes
- Increasing age
- Obesity
- Sedentary lifestyle
- Drinking sugar-sweetened beverages
- History of gestational diabetes or having had a baby weighing more than nine pounds at birth
- Family history of diabetes
- Having high blood pressure or high cholesterol
- From certain minority ethnic groups
- Low educational attainment
- Low income
- Living in neighborhoods with low socioeconomic status

### **USE STRATEGIES PROVEN TO HELP PREVENT TYPE 2 DIABETES**

- Be physically active at least 30 minutes 5 times per week
- Make healthy food choices, including more fruits and vegetables, more whole grain foods, and less saturated fat
- Drink fewer sugar-sweetened beverages
- Maintain a healthy weight and, for those who are overweight, lose >5-7% of body weight
- See a health care provider on a regular basis
- Have regular glucose screenings

### **LEARN THE WARNING SIGNS TO HELP DETECT DIABETES**

- Excess thirst
- Excess urination
- Rapid unexplained weight loss
- Fatigue
- Blurry vision
- **Note:** type 2 diabetes often has no warning signs.



California Diabetes Program, Diabetes Information Resource Center (DIRC) at [www.caldiabetes.org](http://www.caldiabetes.org)  
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### **One out of seven adult Californians has diabetes and the numbers are rising rapidly.**

- There were an estimated 4 million Californians with diabetes in 2009, meaning that 1 out of 7 adult Californians (14.3 percent) has diabetes. Of these, 2.5 million (9.1 percent) are aware that they have diabetes, and about 1.4 million (5.2 percent) adults have undiagnosed diabetes, meaning that they are not yet aware. (4,10)
- Diabetes numbers are rapidly growing. From 2000 to 2009, the prevalence of diagnosed diabetes rose from 6.8 to 9.1 percent of California adults, representing a 34 percent increase in less than a decade. (4)
- New cases of diabetes in California increased 36 percent, from 6.6 per 1,000 (1995-1997) to 9.0 (2005-2007). California had the greatest number of annual new cases (approximated 208,000) among all the states and territories in the U.S. (5)
- In 2007-2008, about 11.1 million (41 percent) adults in California had prediabetes, suggesting that future rates of diabetes will continue to rise in the absence of intervention. (6,10)
- Prevalence of gestational diabetes in California has increased 60 percent in just seven years, from 3.3 percent of hospital deliveries in 1998 to 5.3 percent in 2005. (7)
- In 2008, about 18,000 (2.3 per 1,000) children between ages 5-19 in California had diagnosed diabetes, with 15,000 having type 1 diabetes and 3,000 having type 2 diabetes. (8) More recent, small studies suggest a consistent rise in type 2 diabetes among children and youth, with almost half of the diabetes cases in youth being type 2. (9)

### **People from minority ethnic groups, who are poor, or are disadvantaged have especially high rates of diabetes.**

- In 2009, 9.6 percent of all men and 8.6 percent of all women in California had diagnosed diabetes. (4)
- In 2009, 1 in 7 adult American Indians/Alaskan Natives/Pacific Islanders (13.7 percent) had diagnosed diabetes, as did 1 in 8 African Americans (12.4 percent), 1 in 9 Latinos (10.9 percent), 1 in 11 Asian Americans (8.8 percent), and 1 in 14 Whites (7.1 percent). (4)
- In 2009, among Californians between ages 45-64, 20 percent of Latinos, 18.2 percent of African Americans, 16.7 percent of American Indian/Alaskan Natives, and 14.5 percent of Asian Americans had diagnosed diabetes, compared to 8.2 percent of Whites. (4)
- In 2009, over 502,000 adults with diagnosed diabetes had Medi-Cal insurance coverage; over 398,000 were uninsured. (4)
- In 2009, diagnosed diabetes prevalence was much higher among those with a family income below 100 percent of the federal poverty level (FPL) (12.4 percent) compared to those whose income is above 300 percent of the FPL (6.1 percent). (4)
- In 2009, diagnosed diabetes prevalence was much higher among those with less than a high school degree (13.2 percent) compared to those with a college degree or higher (7.8 percent). (4)
- In 2001, diabetes prevalence along the US-Mexico border, including the California-Mexico border area, (15.1 percent) was higher compared to the rest of the state. (11)
- In 2008, one in 6 (16.1 percent) adolescents ages 12-19 had prediabetes. (12)
- In 2009, 11.9 percent of people with diabetes who smoke, whereas 13.6 percent of smokers in state general population. However, smoking rates are particularly higher in people with diabetes in African Americans (17.1 percent), in age 18-44 (17.3 percent), and among Medicaid recipients (19.6 percent). (4)

### **Diabetes costs in California exceed \$24 billion each year.**

- Total health care and related costs for the treatment of diabetes are about \$24.5 billion. (13)
- Direct medical costs (e.g., hospitalizations, medical care, and treatment supplies) account for about \$18.7 billion, with the other \$5.8 billion including indirect costs such as disability payments, time lost from work, and premature death. (13)
- The average annual treatment cost per case for diagnosed diabetes was nearly \$10,000 in 2007. The economic burden of diabetes and prediabetes on the average person in the US, has been estimated to be \$700 for every man, woman, and child – representing a hidden ‘tax’ paid by all through higher insurance premiums. (14)

### **Preventing and controlling the diabetes epidemic in California will require concerted and multi-pronged efforts to improve access to comprehensive healthcare and promote healthy behavior among people with and at risk of diabetes by fostering policies that improve the environments where people live, work, learn and play.**

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