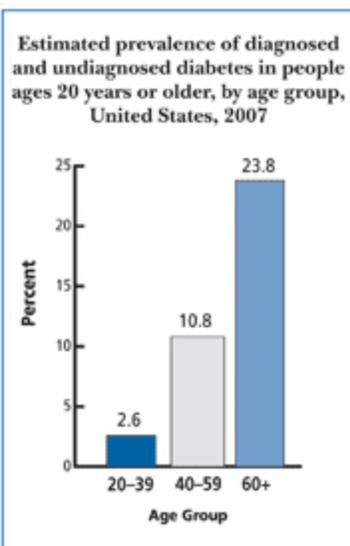


EL CAMINO MEDICAL CLINIC
1828 El Camino Real, Suite 706
Burlingame, CA 94010
Phone: (650)777-9117
Fax: (650)860-3269

Diabetes Overview

Almost everyone knows someone who has diabetes. An estimated 23.6 million people in the United States—7.8 percent of the population—have diabetes, a serious, lifelong condition. Of those, 17.9 million have been diagnosed, and 5.7 million have not yet been diagnosed. In 2007, about 1.6 million people ages 20 or older were diagnosed with diabetes.



Source: 2003–2006 National Health and Nutrition Examination Survey estimates of total prevalence—both diagnosed and undiagnosed—were projected to year 2007.

What is diabetes?

Diabetes is a disorder of metabolism—the way the body uses digested food for growth and energy. Most of the food people eat is broken down into glucose, the form of sugar in the blood. Glucose is the main source of fuel for the body.

Courtesy of El Camino Medical Clinic, 1828 El Camino Real, Ste 706, Burlingame, CA 94010

After digestion, glucose passes into the bloodstream, where it is used by cells for growth and energy. For glucose to get into cells, insulin must be present. Insulin is a hormone produced by the pancreas, a large gland behind the stomach.

When people eat, the pancreas automatically produces the right amount of insulin to move glucose from blood into the cells. In people with diabetes, however, the pancreas either produces little or no insulin, or the cells do not respond appropriately to the insulin that is produced. Glucose builds up in the blood, overflows into the urine, and passes out of the body in the urine. Thus, the body loses its main source of fuel even though the blood contains large amounts of glucose.

What are the types of diabetes?

The three main types of diabetes are

- type 1 diabetes
- type 2 diabetes
- gestational diabetes

Type 1 Diabetes

Type 1 diabetes is an autoimmune disease. An autoimmune disease results when the body's system for fighting infection—the immune system—turns against a part of the body. In diabetes, the immune system attacks and destroys the insulin-producing beta cells in the pancreas. The pancreas then produces little or no insulin. A person who has type 1 diabetes must take insulin daily to live.

Type 2 Diabetes

The most common form of diabetes is type 2 diabetes. About 90 to 95 percent of people with diabetes have type 2. This form of diabetes is most often associated with older age, obesity, family history of diabetes, previous history of gestational diabetes, physical inactivity, and certain ethnicities. About 80 percent of people with type 2 diabetes are overweight.

When type 2 diabetes is diagnosed, the pancreas is usually producing enough insulin, but for unknown reasons the body cannot use the insulin effectively, a condition called insulin resistance. After several years, insulin production decreases. The result is the same as for type 1 diabetes—glucose builds up in the blood and the body cannot make efficient use of its main source of fuel.

The symptoms of type 2 diabetes develop gradually. Their onset is not as sudden as in type 1 diabetes. Symptoms may include fatigue, frequent urination, increased thirst and hunger, weight loss, blurred vision, and slow healing of wounds or sores. Some people have no symptoms.

Gestational Diabetes

Some women develop gestational diabetes late in pregnancy. Although this form of diabetes usually disappears after the birth of the baby, women who have had gestational diabetes have a 40 to 60 percent chance of developing type 2 diabetes within 5 to 10 years. Maintaining a reasonable body weight and being physically active may help prevent development of type 2 diabetes.

About 3 to 8 percent of pregnant women in the United States develop gestational diabetes. As with type 2 diabetes, gestational diabetes occurs more often in some ethnic groups and among women with a family history of diabetes. Gestational diabetes is caused by the hormones of pregnancy or a shortage of insulin. Women with gestational diabetes may not experience any symptoms.

How is diabetes diagnosed?

The fasting blood glucose test is the preferred test for diagnosing diabetes in children and nonpregnant adults. The test is most reliable when done in the morning. However, a diagnosis of diabetes can be made based on any of the following test results, confirmed by retesting on a different day:

- A blood glucose level of 126 milli grams per deciliter (mg/dL) or higher after an 8-hour fast. This test is called the fasting blood glucose test.
- A blood glucose level of 200 mg/dL or higher 2 hours after drinking a beverage containing 75 grams of glucose dissolved in water. This test is called the oral glucose tolerance test (OGTT).

Courtesy of El Camino Medical Clinic, 1828 El Camino Real, Ste 706, Burlingame, CA 94010

- A random—taken at any time of day—blood glucose level of 200 mg/dL or higher, along with the presence of diabetes symptoms.

Gestational diabetes is diagnosed based on blood glucose levels measured during the OGTT. Glucose levels are normally lower during pregnancy, so the cutoff levels for diagnosis of diabetes in pregnancy are lower. Blood glucose levels are measured before a woman drinks a beverage containing glucose. Then levels are checked 1, 2, and 3 hours afterward. If a woman has two blood glucose levels meeting or exceeding any of the following numbers, she has gestational diabetes: a fasting blood glucose level of 95 mg/dL, a 1-hour level of 180 mg/dL, a 2-hour level of 155 mg/dL, or a 3-hour level of 140 mg/dL.

The good news is that people with pre-diabetes can do a lot to prevent or delay diabetes. Studies have clearly shown that people can lower their risk of developing diabetes by losing 5 to 7 percent of their body weight through diet and increased physical activity. Study participants lost weight by cutting fat and calories in their diet and by exercising—most chose walking—at least 30 minutes a day, 5 days a week.

Who gets diabetes?

- **Age 20 years or older:** 23.5 million, or 10.7 percent, of all people in this age group have diabetes.
- **Age 60 years or older:** 12.2 million, or 23.1 percent, of all people in this age group have diabetes.
- **Men:** 12.0 million, or 11.2 percent, of all men ages 20 years or older have diabetes.
- **Women:** 11.5 million, or 10.2 percent, of all women ages 20 years or older have diabetes.
- **Non-Hispanic whites:** 14.9 million, or 9.8 percent, of all non-Hispanic whites ages 20 years or older have diabetes.
- **Non-Hispanic blacks:** 3.7 million, or 14.7 percent, of all non-Hispanic blacks ages 20 years or older have diabetes.

How is diabetes managed?

Healthy eating, physical activity, and blood glucose testing are the basic management tools for type 2 diabetes. In addition, many people with type 2 diabetes require one or more diabetes medicines—pills, insulin, and other injectable medicine—to control their blood glucose levels.

Adults with diabetes are at high risk for cardiovascular disease (CVD). In fact, at least 65 percent of those with diabetes die from heart disease or stroke. Managing diabetes is more than keeping blood glucose levels under control—it is also important to manage blood pressure and cholesterol levels through healthy eating, physical activity, and the use of medications, if needed. By doing so, those with diabetes can lower their risk. Aspirin therapy, if recommended by a person's health care team, and smoking cessation can also help lower risk.

People with diabetes must take responsibility for their day-to-day care. Much of the daily care involves keeping blood glucose levels from going too low or too high. When blood glucose levels drop too low—a condition known as hypoglycemia—a person can become nervous, shaky, and confused. Judgment can be impaired, and if blood glucose falls too low, fainting can occur.