

Screening for “Pre-Diabetes”

The American Diabetic Association and federal health officials coin new term “pre-diabetes” and urge early screening of Americans.

In March 2002, the Department of Health and Human Services (HHS) and the American Diabetes Association (ADA) issued new guidelines for screening for *pre-diabetes*. This newly defined condition occurs when blood sugar levels are higher than normal, but not yet high enough to diagnose full-blown diabetes, a disease that affects 17 million Americans – reaching epidemic levels.

Diabetes is a condition where the body has difficulty converting food into energy in the cells, involving blood sugar and a digestive hormone, insulin. *Pre-diabetes* – medically referred to as *impaired glucose tolerance* – currently affects 16 million Americans and if left unchecked will likely lead to full-blown diabetes within 10-years. Studies demonstrate that pre-diabetes greatly increases the risk of developing diabetes and increases heart disease risk by 50%.

The HHS and ADA recommend testing all individuals over 44-years for pre-diabetes and also those under 45-years if they are overweight *and* have at least one other risk factor for diabetes. Risk factors include: family history; low HDL-cholesterol and high triglycerides; high blood pressure; previous gestational diabetes or birth of a baby over 9 pounds; and being a member of a minority group at increased risk of diabetes.

Why screen for *pre-diabetes*? Research has shown that even moderate lifestyle changes including increased physical activity, eating a healthy diet and losing weight can delay or prevent the development of full-blown diabetes later. A major study of over 3,000 people has shown that diet and exercise resulting in as little as 5-7% weight loss can reduce risk of diabetes by 58%. This is great incentive for individuals to get screened and make healthy changes to dramatically reduce risk of this deadly disease.

References:

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