

Diabetes and Obesity

Madam Chair, Members of the Committee. Thank you for the opportunity to speak to you on this important issue.

Diabetes has reached epidemic proportions in the United States and in Nevada the incidence of diabetes has grown from less than 5% of the population in 1992 to an estimated 6.7% of the population in 2000.

According to our State Diabetes Control and Prevention Program **96,095** Nevadans were told they had diabetes and an estimated **430,000** persons in Nevada were at increased risk of undiagnosed diabetes because of the risk factors of age, obesity, and sedentary lifestyle. The direct cost of diabetes in hospitalization in Nevada totaled **721** million in 2000. Nationally diabetes accounts for 1 out of every 10.00 dollars spent on healthcare and consumes 25% of Medicare dollars. It is by some measures considered to be the single most costly disease because it contributes to so many other health problems, costing \$132 billion in 2002 in the US and takes more lives than AIDS, breast cancer and automobile accidents combined.

It is estimated by the Center for Disease Control that 1 out of every 3 children born in the year 2000 will develop diabetes unless we take drastic measures now. Between 2000 and 2050, it is estimated that the number of Americans diagnosed with diabetes will increase by 165 percent.

The fastest growing incidence of diabetes is Type 2 diabetes. Type 2 diabetes in the past was referred to as adult on-set, non-insulin dependent diabetes and was most frequently diagnosed in people age 65 or older.

Nevada Diabetes Association for Children and Adults
Mylan Hawkins, Executive Director

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Today this form of the disease is showing up in children as young as 6 years of age. It is estimated that 25 to 60 percent of all new cases of diabetes in children is Type 2. Type2 diabetes was attributed largely to aging, ethnicity and heredity. As the epidemic of diabetes has grown affecting younger populations it can be directly linked to obesity and a sedentary life style along with the aforementioned factors.

In a recent publication in DiabetesNews reporting on research done by two researchers at Kaiser Permanente's Center for Health Research (CHR) Young adults, age 18-44, who get type 2 diabetes are 14 times more likely to suffer a heart attack and up to 30 times more likely to have a stroke than their peers without diabetes. Stroke Risk Increased in this group Up to 30 Times.

A weight gain of 11 to 18 pounds increases a person's risk of developing type 2 diabetes to twice that of individuals who have not gained weight. Over 80% of people with diabetes are overweight or obese.

As Nevada's population soars both in numbers and body mass, the costs, direct and indirect to deal with this single condition will be astronomical. The national cost of Type 2 diabetes in 2001 related to overweight and obesity was a **Total cost:** \$21.2 billion, with **Direct cost:** \$5.3 billion, and **Indirect cost:** \$15.9 billion. Nevada's current healthcare system is ill equipped to meet this growing healthcare crisis. The growing number of uninsured in our state compounds the problem as does access to care and Medicaid policies that because of financial constraints do not provide coverage for some procedures that could help reduce a number of the costly

complications such as heart disease, stroke, lower end extremity amputations, blindness and kidney failure attendant to this disease.

Our organization is working on the front lines to reduce the incidence of diabetes in Nevada. Among our efforts is “The Defeat Diabetes Project” targeting high-risk populations including Hispanic, African and Native American populations. The program screened over 1250 people in the past 3 years in partnership with Saint Mary’s, the HAWC Clinic, Washoe County District Health Dept. and Reno Host Lion’s Club. The screenings are not just to find diabetes in these populations but to identify the pre-diabetes condition. All screened participants receive counseling on diet, exercise and risk factors by Certified Diabetes Educators who direct those individuals who do not have a doctor and/or insurance to community clinics where they can receive follow up care and management.

Our Chronic Disease Self management program address all chronic health conditions and currently is available statewide and is free of charge. The program has diet, exercise and stress management components and helps to reduce the incidence of hospitalizations related to chronic health conditions.

We worked with the State DPCP and the Carson City School District on a pilot project for healthier eating called “Dinning with Diabetes”. We speak to groups all over the state on how to prevent diabetes and reduce the complications from diabetes. We offer continuing education programs to healthcare professionals, camp programs for children and families dealing with diabetes, free information, free emergency diabetes supplies and services.

Unfortunately all of the programs and services we offer will not stem the tide of this epidemic. A concerted effort must be made to change our fast food, over sized, slow motion lifestyle if we are to impact the diseases and conditions that obesity is directly linked to. We are in the battle of the bulge and if we fail to address this problem with every available resource we will.. no pun intended be crushed it's weight.

We know that poverty and obesity go hand in hand. Foods that are high in fats, simple sugars and starches and low in nutrition are cheap as is a wide array of fast foods. It is not uncommon for children in low income households to drink a can of cola along with a high sugar cereal for breakfast, eat pizza for lunch and hamburger and fries for dinner because it's fast and cheap. It is also not uncommon for everyone regardless of income in our fast paced, no time to sit down and share a real meal society to grab a high carbohydrate high fat food standing at the counter before rushing off to the next event where we will down a super sized soft drink and another high fat/high carbohydrate snack. Is there any coincidence that 65% of our adult population and 13% of our child are classified as overweight?

Compounding the problem and contributing to the costs is the fact that people who have diabetes as well as people who are obese have a greater risk of developing depression and other mental health problems. And let us not forget the tremendous cost of dental care that is all too frequently overlooked in discussions of the cost related to obesity and diabetes and diabetic complications. Studies at Baylor College of Dentistry in Dallas, Texas among other studies have shown that people who have diabetes and people

who eat a diet high in fat and refined carbohydrates have a greater risk of gum disease and tooth decay.

If we are earnest about addressing this problem we must initiate measure today that can directly contribute to lowering the incidence of obesity and diabetes in our communities. We must start in the schools and not only teach our children how to make healthy food choices but make sure they are available. We can insist that the candy and other unhealthy snack and soda machines come out of our schools. There are healthier choices that can help raise money for school districts. There are better methods of fund raising for our schools then having our children go door to door to sell candy. We must put PE programs back in our schools. We can not afford not to have physical education everyday in every school for every one of our children. We must all get moving. We know that even people who are overweight, but who exercise are far less likely to develop diabetes and that exercise even in overweight people lowers blood pressure and reduce their risk for heart disease.

We must attack this epidemic with the same intensity that we attacked smoking cessation. We must reach out to families and make it easier for them to provide healthy food at home. Each of us must set the example. We can't be talking about this problem while hitting the remote button. Our communities need to promote the wonderful outdoor activities available. Provide walking paths and bike lanes, create more parks and open space and keep our parks attractive and safe. Develop a community wide campaign to "Get Moving". Businesses need to be involved as well. Providing healthier food choices in company cafeterias, employee health programs and

incentives that can result in reduced insurance rates and reward employees who take the steps to up their level of activity and reduce their weight..

There are so many tools that our organization and other organizations can make available to help attack this problem.. But we need you to help open the doors to the schools and the work places and to the airwaves to get the message out. Fat kills... That's a fact. Individuals who are obese (BMI > 30)* have a 50 to 100% increased risk of premature death from all causes, compared to individuals with a healthy weight.

Each of us must make an effort from this point on to do something to help combat this epidemic. This year I am giving all of my friends a pedometer for Christmas... and encourage them to share a meal with a friend... And I mean share a meal. One meal divided in half.

I applauded this committee for your study of the impact of obesity in our state and thank you again for the opportunity to provide input on this important health issue. I will be happy to answer any questions.