State of the State of Diabetes and Obesity in Alabama Donald E. Williamson, M.D. State Health Officer



Overweight and Obesity

 Alabama has the eighth highest prevalence of obesity in the country



BRFSS, 2013

Obesity Percentages in Alabama and the U.S., 2002-2013 (BMI≥30.0)



Source: 2002-2013 Behavioral Risk Factor Surveillance System (BRFSS)

* The BRFSS 2011-2013 prevalence data are not directly comparable to previous years of BRFSS data because of changes in weighting methodology and the addition of the cell phone sampling frame.

Obesity Among U.S. Adults, 2013



Obesity in Youth

- 15.8% of youth are overweight (9th-12th graders)
- 17.1% of youth are obese (#3 in the nation)
- Same as 2011 data
- CDC, YRBS 2013

Obesity in Children

- A study completed by the Division of Oral Health at ADPH in 2013 found that almost 22% of 3rd graders in Alabama are obese (n = 3952).
- Another 16.6% are overweight.

 Combined, 38.6% of 3rd graders are either overweight or obese.

Obesity in Children

 The same study found that 39% of kindergarteners in Alabama are either overweight or obese (n=4362).

Complications of Obesity

- Coronary heart disease
- Type 2 diabetes
- Cancers (endometrial, breast, and colon)
- High blood pressure
- High cholesterol
- Stroke

- Liver and gallbladder disease
- Sleep apnea and respiratory problems
- Osteoarthritis
- Gynecological problems

Costs of Obesity in Alabama

 The medical costs for Alabamians who are obese are \$1.7 billion higher than those of normal weight.

- Promote the availability of affordable healthy food and beverages. Example - increasing the number of supermarkets and/or farmers markets in areas where they are unavailable or limited.
- Support healthy food and beverage choices.
 Example discourage the consumption of sugar-sweetened beverages.

 Encourage breastfeeding. Example – policies that support breastfeeding at work.

 Encourage physical activity or limit sedentary activity among children and youth. Example

 reduce screen time in public service venues such as licensed child care facilities.

- Create safe communities that support physical activity. Example – improve access to outdoor recreation facilities such as a playground or walking trail.
- Encourage communities to organize for change.
 Example local governments participate in community coalitions or partnerships to address obesity

Source: Recommended Community Strategies and Measurements to Prevent Obesity in the United States, CDC, 2009

- CDC funding in Alabama is working to:
 - Promote the adoption of nutrition standards in vending machines in worksites.
 - Promote the adoption of physical education/physical activity in schools, worksites, and early care education centers.
 - Create healthy school environments with mini-grants to school systems.

Diabetes

Diabetes in Alabama

 In 2013, Alabama had the highest prevalence of diabetes in the nation.

Diabetes in Alabama

 Approximately 510,000 Alabama adults have diabetes (13.8% diabetes prevalence).

 Approximately 255,000 Alabama adults have pre-diabetes (8.5% prevalence rate).



BRFSS, 2013

Percentage of Adult-Diagnosed Diabetes in Alabama and the U.S., 2000-2013



* The BRFSS 2011-2013 prevalence data are not directly comparable to previous years of BRFSS data because of changes in weighting methodology and the addition of the cell phone sampling frame.

Diabetes Complications

- Kidney failure
- Amputations
- Blindness
- Major risk factor for heart disease and stroke
- Nerve damage

Annual Cost of Diabetes in Alabama

- Total diabetes cost was \$4.31 billion
 Medical costs: \$3.01 billion
 - Indirect expenses (lost productivity and premature mortality): \$1.3 billion
- People with diabetes spent \$13,700 on medical costs.

Strategies for Diabetes Prevention and Control

- Combined diet and physical activity program
- Case management
- Disease management
- Self-Management education

Source: The Guide to Community Preventive Services, July 2014

Diabetes Prevention

- National Diabetes Prevention Program.
- Evidence-based lifestyle change program for preventing Type 2 diabetes.
- Can help people cut their risk of developing Type 2 diabetes in half.
- Participants work with a lifestyle coach in a group setting for 16 sessions and 6 post-core sessions.

Diabetes Self-Management Education (DSME)

- Empowers people with diabetes by providing knowledge and skills to effectively manage diabetes.
- Teaches training on healthy eating, being active, monitoring, medication, coping, and program solving.
- Covered by Medicare Part B for 10 hours of initial DSME training, plus 2 hours refresher.

Resources for Communities and Schools to Address Obesity and Diabetes

 CDC's Division of Nutrition, Physical Activity, and Obesity

-www.cdc.gov/nutrition

-www.cdc.gov/diabetes

Let's Move

-www.letsmove.gov

Resources for Communities and Schools to Address Obesity and Diabetes

- USDA's Food and Nutrition Information Center – http://fnic.nal.usda.gov/
- Accredited DSME Programs
 - <u>http://professional.diabetes.org/erp_list.aspx</u>
 - <u>http://www.diabeteseducator.org/Profession</u> <u>alResources/accred/Programs.html#Alabama</u>
- Alliance for a Healthier Generation
 - www.healthiergeneration.org

Resources for Communities and Schools to Address Obesity and Diabetes

 We Can! Ways to Enhance Children's Activity and Nutrition

-wecan.nhlbi.nih.gov/

The Community Guide
 –www.communityguide.org

