

Diabetes Facts: *The Diabetes—Obesity Link*

Type 2 diabetes can be prevented. Reducing obesity will save money by reducing type 2 diabetes and its costs

Total cost of diabetes in Alaska

- Total direct and indirect costs associated with diabetes amounted to more than \$418.8 million in 2007.¹

Alaska Medicaid expenditures²

Alaska children with diabetes:

- In SFY 08, **\$2.5 million could have been saved** if type 2 diabetes had been prevented among Alaska Medicaid recipients <19.
 - The annual added cost of type 2 diabetes care has nearly doubled since SFY 04, when it was \$1.3 million.
 - In SFY 08, 42% of Alaska Medicaid recipients < 19 with diabetes had type 2 diabetes, a preventable disease.

Adult Alaskans with diabetes:

- In SFY 08, **\$42.9 million could have been saved** if type 2 diabetes had been prevented among adult Alaska Medicaid recipients.
 - The annual added cost of type 2 diabetes has increased by more than 50% since SFY 04, when it was \$28.0 million.
 - Between SFY 04 and SFY 08, the number of adult Medicaid recipients with type 2 diabetes increased by 46.4%.

Social costs of diabetes in Alaska

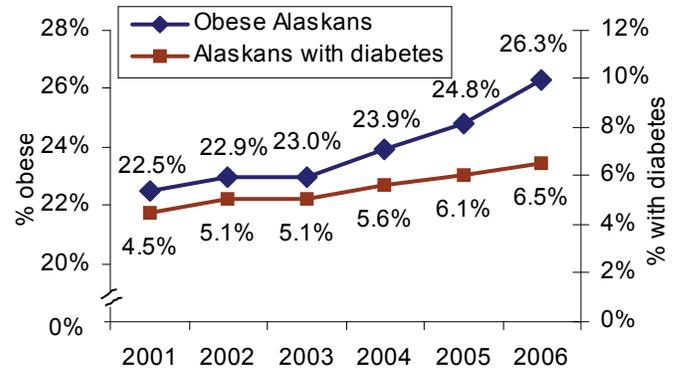
- **Lost productivity:** Nearly 10% of Alaskans with diabetes were unable to work, more than four times the percentage (2%) of those without diabetes.³
- **Disabilities:** 46% of Alaskans with diabetes had a disability, more than twice the percentage (20%) of Alaskans without diabetes.³
- **Deaths:** Since 1996, diabetes has been the 7th leading cause of mortality in Alaska.⁴



Produced by the Diabetes Program, Division of Public Health, Alaska Department of Health and Social Services (2/20/2009)

¹<http://www.diabetes.org/advocacy-and-legalresources/cost-of-diabetes.jsp> (printed 1/28/09), indirect costs = disability, absenteeism, presenteeism and mortality; ²Alaska Medicaid claims, unpublished data; ³Alaska Behavioral Risk Factor Surveillance System, 2000–2007, unpublished data; ⁴Top ten leading causes of death for Alaska. Available at: <http://www.hss.state.ak.us/dph/bvs/data/default.htm>; ⁵2007 and 1999 Youth Risk Factor Surveys <http://www.hss.state.ak.us/dph/chronic/school/YRBS.htm> (printed 2/9/09); ⁶Fenaughty A, Fink K, et al. Prevalence of overweight and obesity among Anchorage School District students, 1998–2008. *CDPHP Chronicles*; Feb 2009 : Freedman DS, Khan LK, et al. Relation of childhood height to obesity among adults: the Bogalusa Heart Study. *Pediatrics* Feb 2002; 109(2); <http://www.pediatrics.org/cgi/content/full/109/2/e23> (printed 2/2/09); ⁸Sullivan PW, Ghushchyan V, Ben-Joseph RH. The effect of obesity and cardiometabolic risk factors on expenditures and productivity in the United States. *Obesity* Sept 2008; 16(9): 2155–62 (abstract); ⁹Yu AP, Birnbaum HG, et al. Short-term economic impact of body weight change among patients with type 2 diabetes treated with antidiabetic agents: analysis using claims, laboratory and medical record data. *Curr Med Res Opin* Sept 2007; 23(9): 2167–69 (abstract)

2000-2007 Trends in percentages of adult Alaskans with obesity or diabetes



Notes: (a) These percentages are age-adjusted three-year averages. (b) The indicated year is in the middle of each interval (i.e., 2001 represents the 2000–2002 period). (c) Obese = BMI \geq 30.

Obesity and diabetes in Alaska

Obesity increased 23% among Alaska high school students between 1999 and 2007⁵ and 17% among adults between 2001 and 2007.³

Among Alaska youth:

- 18% of Anchorage School District students (K–12) were obese in the 2007–2008 school year.⁶
- 75% of obese children become obese adults.⁷

Among Alaska adults:

- In 2006, the prevalence of diabetes among obese Alaskans (12.0%) was six times higher than among normal weight Alaskans (1.8%); 3.9% of overweight Alaskans had diabetes.⁴
- In 2006, an estimated 27,155 Alaskans had diabetes, up 63% since 2001.⁴
 - 60.7% of Alaskans with diabetes were obese.

Obesity and diabetes - a costly combination

For adults with diabetes, research suggests:

- Health care for those who are obese costs about one-third more than health care for those with normal weight (or nearly \$2,000 more per person per year).⁸
- A 1.0% change in weight corresponds to a 3.1% change in total per capita health care costs.⁹