# Characterization of Lack of Diabetes Screening Among Nondiabetic Persons in Alabama, 2013

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# Background

#### 29 million Americans have diabetes

- 12.3% of U.S. adult population
- One in 4 remain undiagnosed







# 86 million U.S. adults have prediabetes

- 37% of U.S. adults
- Only 11% are aware of having prediabetes



 \* Centers for Disease Control and Prevention. National Diabetes Statistics Report: Estimates of Diabetes and Its Burden in the United States, 2014. Atlanta, GA: U.S. Department of Health and Human Services; 2014.
Centers for Disease Control and Prevention (CDC). (2013, March 22). Awareness of Prediabetes - United States, 2005-2010. MMWR. Morbidity and Mortality Weekly Reports.

# **Diabetes Screening Recommendations**

- ADA recommends screening:
  - Age ≥45
  - Overweight or obese with one other risk factor\*
- New USPSTF draft recommendation for diabetes screening:
  - Age ≥45
  - Overweight or obese
  - First-degree relative with DM
  - Certain minority groups
    - o Including African American, Hispanic/Latino, American Indians
- Screen every 3 years
  - Annual if higher risk or previously elevated values
- \*Additional risk factors include: racial/ethnic minority, hypertension, low LDL, high triglyceride, history of cardiovascular disease, gestational diabetes or insulin resistance, first degree relative with diabetes, physical inactivity, delivery of baby >9 lb

- Women with :
  - history of gestational diabetes
  - polycystic ovarian syndrome

#### **Diabetes Screening Question**

- So why do so many people NOT know they have prediabetes or diabetes?
- Are they being screened for it?
- If you don't know you have it, you can't fix it!





#### **Data Source**

#### Behavioral Risk Factor Surveillance Survey (BRFSS)

- Nationwide annual telephone survey (cell phone and landline)
- Collects self-reported health and health risk data
- >100,000 U.S. participants
  - 6,500 in Alabama
- Provides state-level estimates of disease conditions and health behaviors





\* Sponsored by Centers for Disease Control and Prevention, other federal agencies and participating states

## **2013 BRFSS Questionnaire**

#### Awareness of diabetes screening:

# "Has a doctor, nurse or other health professional EVER told you that you have **diabetes**?"

or

"Have you ever been told by a doctor or other health professional that you have **prediabetes** or **borderline diabetes**?"



NO



DIABETES or PREDIABETES (excluded)





No diabetes or prediabetes

## **Methods**

- Diabetes screening analysis (n=4,239) excluded respondents with:
  - Known diabetes, gestational diabetes, prediabetes or missing diabetes status (n=1,998)
  - Unknown or missing testing status (n=266)
- SAS 9.2 weighted analysis accounting for sampling design
- Calculated prevalence ratios for respondent characteristics

# Prevalence of Self-reported Diabetes Screening Within 3 Years Among Nondiabetic Persons– Alabama, 2013

Factor	Prevalence of diabetes screening (%)	
Overall	53.5	
Male	50.3	
Education < high school	47.1	
Annual household income <\$25,000	47.6	
Physical activity guidelines met	53.2	
African American	51.5	
Age ≥45 years	63.7	
Body mass index (BMI) ≥25	56.8	
History of hypertension	66.1	
History of elevated cholesterol	67.3	

Highlighted factors are among indications for receiving diabetes screening

# Health System-related Factors for Lacking Diabetes Screening

Prevalence			
Factor	Ratio	95% CI	P -value
Perceived cost barriers to care	1.3	1.16—1.45	<0.0001
Gap in health insurance coverage	1.4	1.10—1.66	0.010
No health insurance	1.6	1.43—1.76	<0.0001
Lacks identified personal health provider	1.7	1.55—1.87	<0.0001
No medical checkup <5 years	1.9	1.72—2.07	<0.0001

### **Conclusions on Self-reported Testing for Diabetes**

#### Many Alabama adults not aware of diabetes status

- Nearly half of nondiabetic Alabama adults report NOT tested for diabetes <3 years</li>
- Includes 1 in 3 people aged  $\geq$ 45 years
- Nearly half of African Americans and overweight/obese persons
- Many lacking diabetes screening have other medical conditions increasing risk
  - 24% have high blood pressure
  - 33% have elevated cholesterol





#### **Barriers to Diabetes Screening**

#### Financial barriers to health care access

- Lack of health insurance
- Recent gap in coverage
- Perceived cost barriers

Inadequate patient engagement in health care systems

- No recent general medical checkup
- No identified personal health-care provider





#### Consequences

- Missed opportunity for early detection and treatment
- Earlier care reduces health complications and costs



## **Possible Solutions**

- Increase awareness of diabetes, prediabetes, and importance of early screening
- Improve screening using new, broader recommendations of risk groups
- Expand access to health insurance and health systems
- Focus on patient-centered wellness homes and preventive services







## **Summary**

- Identifying people at risk and testing them early for diabetes or prediabetes is key
- Progression of diabetes, complications, and costs can be reduced with early intervention







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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



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