Pre-diabetes prevention
How to reduce the risk of diabetes among your employees

Pre-diabetes is not a new disease, although many people think it is. The condition has always existed; it's just that formal recognition of the condition has not. And like our weight, it is growing at an alarmingly rapid rate.

When a person's blood glucose levels are higher than normal but not high enough for a diagnosis of diabetes, that person is said to have pre-diabetes. It is estimated that 40 percent of U.S. adults between the ages of 40 and 74 (41 million people) have pre-diabetes. It is estimated that 11 percent of people with pre-diabetes eventually develop type 2 diabetes within three years and many others develop type 2 diabetes within 10 years.

“Whether you identify something as a medical condition or not, the important thing to understand about pre-diabetes is that the best way to treat this condition is by eating healthier, becoming more active, and losing weight,” says Michael Parkinson, MD, senior consultant in health and productivity for UPMC Health Plan.

Smart Business spoke to Dr. Parkinson about pre-diabetes and its impact on the work force.

Is pre-diabetes a new condition?

No. What is new is that it is becoming better understood because, unfortunately, it’s more prevalent now than it was 10 years ago. By coining the term ‘pre-diabetes,’ we call attention to the fact that higher than normal blood glucose levels can lead to diabetes. And diabetes is a documented risk for heart attack, stroke, kidney and other diseases.

It is important to realize that 90 percent of all diabetes is type 2 — predominantly caused by being overweight. As we put on the pounds, we increase the number of pre-diabetics — and diabetics — as the disease progresses over time.

Why should employers be concerned about pre-diabetes?

Simply put, the growth of pre-diabetes is an indicator of the health, cost, productivity and competitive challenges that they face. According to statistics from the Centers for Disease Control (CDC) in 2008, 68 percent of U.S. adults and 32 percent of children are overweight or obese. What that means is that — conservatively speaking — medical spending for obesity-related conditions accounts for 10 percent of total health care costs. More importantly, the average adult life expectancy in this country may actually be decreasing. It is possible that, on average, children may live two to five years less than their parents.

Employers can have a substantial effect on improving health, preventing or reducing pre-diabetes in their employees. Therefore, the prevalence of diabetes and pre-diabetes are ‘sentinel’ indicators of progress toward increasing performance, improving health and reducing health care costs.

What is the best treatment for pre-diabetes?

The good news is that treating pre-diabetes does not require expensive medical treatments. Losing a modest amount of weight — 5 to 10 percent of total body weight — through diet and moderate exercise, can reverse the trend and lessen the likelihood of developing diabetes. In fact, in studies conducted nationally and at the University of Pittsburgh, lifestyle changes were shown to be more effective than medication in preventing diabetes.

There needs to be an increased awareness that healthy behaviors, if adopted, can improve the length, quality and performance of our lives, families and companies. For example, only 8 percent of Americans eat five or more fruits or vegetables per day, are physically active 30 minutes or more per day, are within five pounds of their ideal body weight, don’t smoke, and consume less than one to two alcoholic drinks on average per day. That, by and large, is why we’re seeing an epidemic of pre-diabetes and diabetes.

Are there programs that can help people prevent diabetes?

Diabetes prevention programs can be effective when they identify persons at risk for diabetes and then link those people to a primary care physician who can provide the kind of support they will need to help them prevent getting this disease. These programs provide healthy lifestyle education for adults in the hospital’s community who have been identified as having risk factors for pre-diabetes. The programs include group lifestyle balance, nutrition education, smoking cessation, and exercise and fitness programs.

What can employers do about helping to stem pre-diabetes?

Where we live, learn, work and play are greater determinants of our health than our medical care. Where and how we are employed can create a strong positive or negative influence on how we feel about ourselves, and how we interact at home with our families and with others in our communities. Employers and employees need to create a ‘culture of health’ in the worksite, which supports healthy behaviors not only on the job, but also in the home.

For example, employers can ‘walk the walk’ as executives when it comes to their personal habits in healthy eating and being more active. Provide healthy choices in vending machines and cafeterias. Encourage the use of stairwells, ‘walking meetings’ and access to fitness activities. Reward healthy behaviors and publicly acknowledge employees who’ve succeeded in losing weight or tackling a fitness challenge. Implement worksite wellness programs and partner with your health plan to ensure the delivery of evidence-based clinical preventive services to employees and their families.

Healthy behaviors improve health, reduce costs — and along the way, pre-diabetes.

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