

Multnomah County Health Department Community Health Promotion, Partnerships, and Planning Health Assessment And Evaluation



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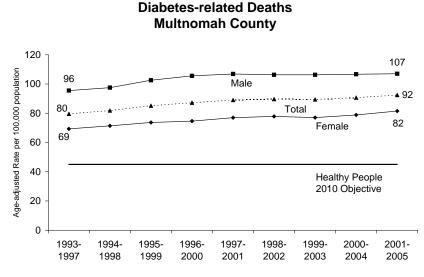
## **Diabetes Mortality and Morbidity**

Diabetes is a chronic disease that can lead to serious complications and premature death. In Multnomah County 7% of adults, approximately 41,000 individuals, have been diagnosed with diabetes.<sup>1</sup> Diabetes was the sixth leading cause of death in Multnomah County in 2005 (35 per 100,000)\*. The County diabetes mortality rate was greater than the U.S. mortality rate in 2005 (25 per 100,000). When diabetes as a contributing factor to the death is included (diabetesrelated mortality) the rate is even greater (96 per 100,000). Diabetes and diabetes-related deaths have increased in Multnomah County since the early 1990s. The increase in diabetes and diabetes mortality corresponds with increases in overweight and obesity among County residents. The diabetes mortality rate is consistently higher among males than among females. (Graph 1) Estimates based on survey data show that the prevalence of diabetes is similar in men and women.<sup>1</sup>

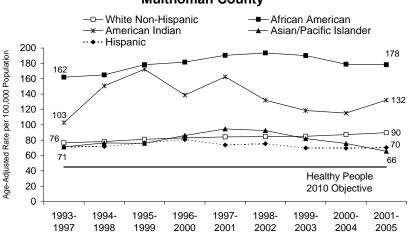
African Americans experience the largest disparity in diabetes mortality. The rate of diabetes-related mortality in African Americans is twice that of White non-Hispanics and 2.7 times greater than Asians. (Graph 2)

### $\mathbf{Costs}$

Although Multnomah County diabetes mortality rates are higher than the U.S. rates, diabetes hospitalization rates are lower compared to the U.S. (14 per 10,000 Multnomah



Graph 1. Diabetes-related Mortality Rate by Gender, Multnomah County.



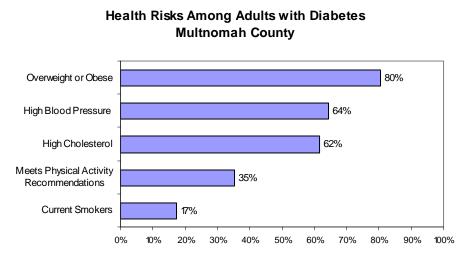
Diabetes-related Mortality Rate by Race/Ethnicity Multnomah County

Graph 2. Diabetes-related Death Rates by Race/Ethnicity, Multnomah County.

\*Diabetes-related deaths are examined above. The Report Card on Racial and Ethnic Health Disparities examined deaths listing diabetes as the underlying cause since diabetes-related deaths were not reported prior to 1993.

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# **Diabetes in Multnomah County**



Graph 3. Health Risks Among Adults with Diabetes, Multnomah County

County residents, 19 per 10,000 U.S. in 2005). The cost of hospitalizations in Multnomah County with a primary diagnosis of diabetes in 2007 was \$15,715,814, an average cost of \$16,020 per hospitalization.<sup>2</sup>

#### **Prevention and Management**

There are steps that individuals can take to control the disease and lower the risk of complications. Many diabetes hospitalizations and deaths can be prevented by better management of the disease. Type 2 diabetes may account for about 90%-95% of all diagnosed cases of diabetes.<sup>3</sup> Type 2 diabetes is associated with obesity and physical inactivity. Lifestyle changes such as a healthy diet and moderate physical activity can prevent or delay the onset of type 2 diabetes among high-risk adults.

Diabetics are at increased risk for heart disease and stroke, so addressing high blood pressure, high cholesterol, obesity, smoking and physical inactivity is important. People with diabetes can live long and healthy lives if they carefully manage their blood sugar (an A1C level of less than 7%), blood pressure (less than 130 over 80) and bad cholesterol (LDL level below 100

### mg/dL).4

Among adults with diabetes in Multnomah County<sup>1</sup>:

- 80% were overweight or obese
- 64% had high blood pressure
- 62% had high cholesterol
- 65% did not meet physical activity recommendations
- 17% reported being a current smoker

The U.S. Healthy People 2010 preventive health care objectives for people with diabetes include having a diabetic eye exam and foot exam once a year and being up-to-date on immunizations. Multnomah County met the objective for foot and eye exams but did not meet the objective for a yearly flu shot in 2006.<sup>5</sup>

### Initiatives

Community level activities can support an individuals ability to manage their diabetes. The Public Health Department has a number of initiatives aimed at reducing the burden of diabetes in Multnomah County.

The Health Department's Healthy **Eating Active Living Initiative** brings together a coalition of local residents, community-based organizations, academic institutions, and other governmental entities to identify and implement policy and environmental change strategies that promote physical activity and healthy eating.

Multnomah County became the third jurisdiction in the country to implement a chain restaurant menu labeling policy which requires chains to list calories for standard menu items on printed menus, menu boards, and food tags. Menu labeling is one strategy within the county's comprehensive approach to enable the public to make informed choices and promote healthy eating.

The Health Department's Integrated Clinic Services Building Better Care project proactively manages clinic care of diabetes to improve client health outcomes by improving the effectiveness of chronic disease management and preventive care.

#### References

- Behavioral Risk Factor Surveillance Sys-1. tem. Oregon Department of Human Services, Center for Health Statistics. 2002-2005
- 2. Statewide Inpatient Discharges, Oregon Association of Hospitals and Health Systems. 2007.
- Center for Disease Control and Prevention, 3. Diabetes Public Health Resource. www. cdc.gov.
- 4. American Diabetes Association, Standards of Care 2008, www.diabetes.org.
- 5. Behavioral Risk Factor Surveillance System. Oregon Department of Human Services, Center for Health Statistics. 2006.

#### **Community Health Assessment**

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