

Diabetes

in South Carolina

FACT SHEET

S.C. ranks 7th highest in the nation in the percent of adult population with diabetes.

- The prevalence of diabetes increases with age – a dramatic increase can be seen among those 45 years of age and older.
- Approximately 1 in 6 African-Americans in South Carolina has diabetes. South Carolina had the 17th highest rate of diabetes among African-Americans in the nation.
- About 79 percent of adults with diabetes have high blood pressure.
- Uncontrolled diabetes can lead to many complications including blindness, kidney failure, heart attacks, strokes and amputations.
- In 2014, three people died each day from diabetes – that is one death from diabetes every 8 hours.
- Diabetes is the 7th leading cause of death in South Carolina after heart disease, cancer, chronic lower respiratory disease, accidents, stroke, and Alzheimer's.

Health Care Costs:

- In 2014, the total amount for hospital charges related to diabetes diagnosis in South Carolina was \$404 million.
- Diabetes hospital costs have increased by 60 percent in the past five years in South Carolina.
- Medicare and Medicaid paid for more than two-thirds of this cost.

Types of Diabetes:

Type 1 Diabetes – Usually diagnosed in children and young adults. The body does not produce insulin. People with type 1 diabetes must take insulin injections.

Type 2 Diabetes – The body does not produce enough insulin and/or the body cannot properly use insulin. Type 2 diabetes in children is on the rise due to the childhood obesity epidemic, particularly in African-Americans and Hispanics.

Gestational Diabetes – Pregnant women who have high blood glucose levels have gestational diabetes. They are more likely to develop type 2 diabetes years later.

Pre-diabetes – Before people develop type 2 diabetes, they almost always have “pre-diabetes.” People with pre-diabetes are at higher risk of cardiovascular diseases. However, you can delay or prevent the onset of type 2 diabetes by eating healthier and being more physically active.

Who needs to be tested for diabetes?

Everyone needs to be tested for diabetes beginning at age 45. Earlier testing is recommended if you:

- Are overweight or obese.
- Do not exercise regularly.
- Have a parent, brother or sister who has (or had) diabetes.
- Are of a high risk ethnic or racial group (Black, Hispanic, or Native American).
- Have high blood pressure.
- Have high cholesterol or triglyceride levels.
- Delivered a baby weighing more than 9 pounds at birth or had gestational diabetes while you were pregnant.

Diagnosing Diabetes:

Your doctor can do a simple blood test to determine if you have diabetes. A fasting blood glucose level between 100 and 125 mg/dl signals pre-diabetes. A fasting blood glucose level of 126 mg/dl or higher diagnoses diabetes. When glucose builds up in the blood instead of going into cells, the complications of diabetes can occur over time.

Your doctor can also check an average blood sugar level using a non-fasting blood test called an A1C test. This test shows your average blood sugar from the past 2-3 months.

The American Diabetes Association recommends that people with diabetes should:

- Have an eye exam every year.
- Have a foot exam every year, examine your feet daily.
- Have an A1C test at least twice a year.
- Have your blood pressure checked regularly.
- Get regular dental exams.
- Have your cholesterol checked at least once a year.
- Get a flu shot every year.
- Check your blood sugar regularly.
- Get a pneumonia shot at least once in a lifetime.
- Complete a diabetes self-management education course.

Important points to remember:

- People with diabetes can live long, healthy lives when their diabetes is properly managed.
- Diabetes can be prevented or delayed by eating a healthier diet, increasing physical activity, not smoking and losing 5-10 percent of body weight.
- The complications of diabetes can be delayed or prevented when the person manages their diabetes by keeping blood sugars close to the normal level. This includes following a healthy diet, increasing physical activity, taking medication as prescribed and managing stress.

Source List:

2014 Behavior Risk Factor Surveillance Survey, American Diabetes Association (ADA) Standards of Medical Care in Diabetes 2014, DHEC Vital Statistics, Revenue and Fiscal Affairs Office Hospital Discharge Data 2014

For more information on diabetes prevention and management, please contact:

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