Diabetes
By Lula Mitchell

Diabetes is a disorder that affects millions of people each day. It interrupts the body's ability to use blood sugar or glucose, which is a source of energy for the body taken from starches and sugars that we eat. Ten to twenty million Americans are diagnosed with the disease in the United States population. Risk for the disease is greater among the obese, people with high blood pressure, women with gestational diabetes or women who have delivered a baby greater than nine pounds, and people from particular ethnic groups; such as African-Americans, Hispanics, Asians and Native Americans. Diabetes has a strong genetic component, so those people with one or more family members with the disease should be aware of their lifestyles.

There are two types of diabetes, which are known as Type 1 and Type 2. Type 1 diabetes is caused by a combination of genetic and environmental factors, which results in a lack of insulin. Insulin, produced by the pancreas, is a hormone that is released in the body when the body increases its blood sugar after a meal. As a result, the body attacks itself and destroys its insulin-secreting beta cells in the pancreas.

Type 2 diabetes is more common to adults and it is known as "adult-onset" diabetes. The body makes the insulin, but the body may not detect it or the body may even resist the insulin. This results in insulin deficiency; therefore the beta cells stop functioning properly. Type 2 diabetes usually occurs after the age of 30, and it is linked to obesity of people.

In order to take control of the epidemic people must notice if they are at risk, find which treatment therapy is best, and change their lifestyles. Visit a health care provider to be tested for the disease. A simple blood test or urinalysis can get quick results. Monitoring blood glucose levels daily is also important. Hemoglobin A1C or glycated hemoglobin, which is commonly
abbreviated as "A1C" is another important number to regularly test. A1C is the average of glucose levels during the past two to three months. The hemoglobin A1C goal for people with diabetes is less than 7 percent. A1C testing alone can reduce complications from diabetes. Combination testing and monitoring opens "a window into the metabolism," says Richard S. Beaser, M.D., a senior physician at the renowned Joslin Diabetes Center in Boston. Early intervention with insulin therapy can help control the disease and prevent the loss of beta cells. Medication treatment is often given to people with type 2 diabetes along with injections depending on the level of condition. Most important, making changes in lifestyle can help avoid long-term risks such as heart attack and stroke. Maintaining a balanced diet low in fats and sugars, lowering cholesterol levels, avoiding obesity, and exercising on a regular basis will help the body to use insulin and lower blood sugar levels.

All people should support each other in fighting against this epidemic; it should be a team effort. This includes those affected by the disease, those at risk for the disease, and healthcare providers educated on how to treat the disease. We should all take control today and help to prevent this epidemic from affecting another single body.

For further information regarding this article please contact the Maternal Substance Abuse and Child Development Project, Emory University School of Medicine, Department of Psychiatry and Behavioral Sciences, Emory West Campus, 1256 Briarcliff Road N.E., Suite 323-West, Atlanta GA, 30306. You can email us at msacd@listserv.cc.emory.edu, visit our website at http://www.emory.edu/MSACD, or phone us at 404-712-9800.

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References: