

Prevalence of Prediabetes and Abdominal Obesity Among Healthy Weight Adults: 18 Year Trend

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THE STAGGERING COSTS OF DIABETES IN AMERICA



Nearly
30 million
Americans have diabetes.

\$1 in \$3
Medicare dollars
is spent caring for
people with diabetes.

Diabetes and prediabetes cost America
\$322 billion
per year.



86 million
Americans have prediabetes.

\$1 in \$5
health care dollars
is spent caring for
people with diabetes.

Today,
3,835
Americans will be
diagnosed with
diabetes. Today,
diabetes will cause
200 Americans
to undergo an
amputation, **136**
to enter end-stage
kidney disease
treatment and
1,795 to develop
severe retinopathy
that can lead to
vision loss and
blindness.

Learn how to fight this costly disease at diabetes.org/congress



Prediabetes

- Prediabetes is a high risk state for the development of diabetes
- Eighty-six million Americans now have prediabetes
 - 38% of adults without diabetes have prediabetes
 - 90% of adults with prediabetes don't know it
- Without intervention, 15% to 30% of people with prediabetes will develop type 2 diabetes within 5 years.
- Intervening on prediabetes is effective in delaying or stopping the transition to diabetes

Prediabetes and Body Composition

- Secular trends indicate an increase in sedentary lifestyle
- Recent data suggest that some people at normal weight (BMI 18.5-25) may have decreased lean muscle mass
- Among healthy weight people, low grip strength is associated with undiagnosed diabetes and prediabetes

Screening for Prediabetes

- Screening for prediabetes is focused on individuals who are overweight or obese
 - Both USPSTF and ADA recommend screening based on BMI among overweight and obese adults
- Screening that is focused on the overweight and obese may miss individuals who are of healthy weight but have prediabetes.

Purpose

- Examine the nationally representative prevalence of prediabetes and abdominal obesity among healthy weight adults in 1988-1994 and 1999-2012

Methods

- National Health and Nutrition Examination Survey (NHANES) III (1988-1994), and Continuous NHANES (1999-2012)
 - Nationally representative survey sampling non-institutionalized population of the United States
 - Stratified multistage probability sample design
 - Survey includes physical examination, blood and urine tests, and a detailed interview

Methods

○ Subjects

- Adults age 20 and older who have a body mass index of 18.5-24.99, who have not been diagnosed with diabetes or had an HbA1c level of 6.5% or greater at the time of their NHANES physical examination
- Prediabetes defined as HbA1c level between 5.7%-6.4%
- Normoglycemia defined as HbA1c level between 4.0% and 5.6%
- Individuals with HbA1c level below 4.0% were removed from analysis

Methods

○ Abdominal Obesity

- Unhealthy waist circumference
 - Waist circumference greater than 102 cm for men
 - Waist circumference greater than 88 cm for women
- Unhealthy waist to height ratio (WHR)
 - WHR of .53 or greater for men
 - WHR of .49 or greater in women

Methods

○ Covariates

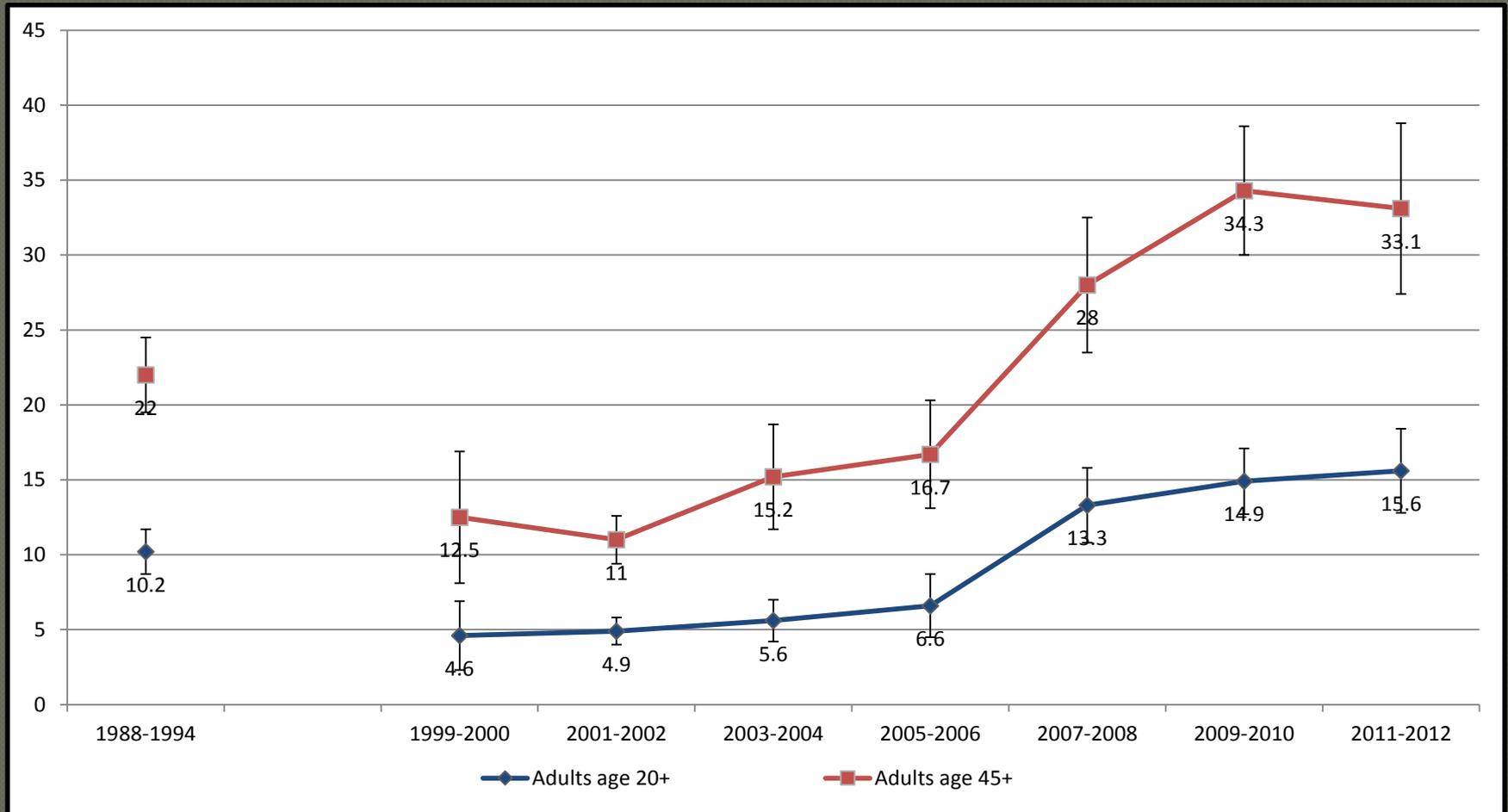
- First degree relative with diabetes
- Age
- Race
- Education
- Poverty to income ratio
- Health insurance coverage

Methods

● Data Analysis

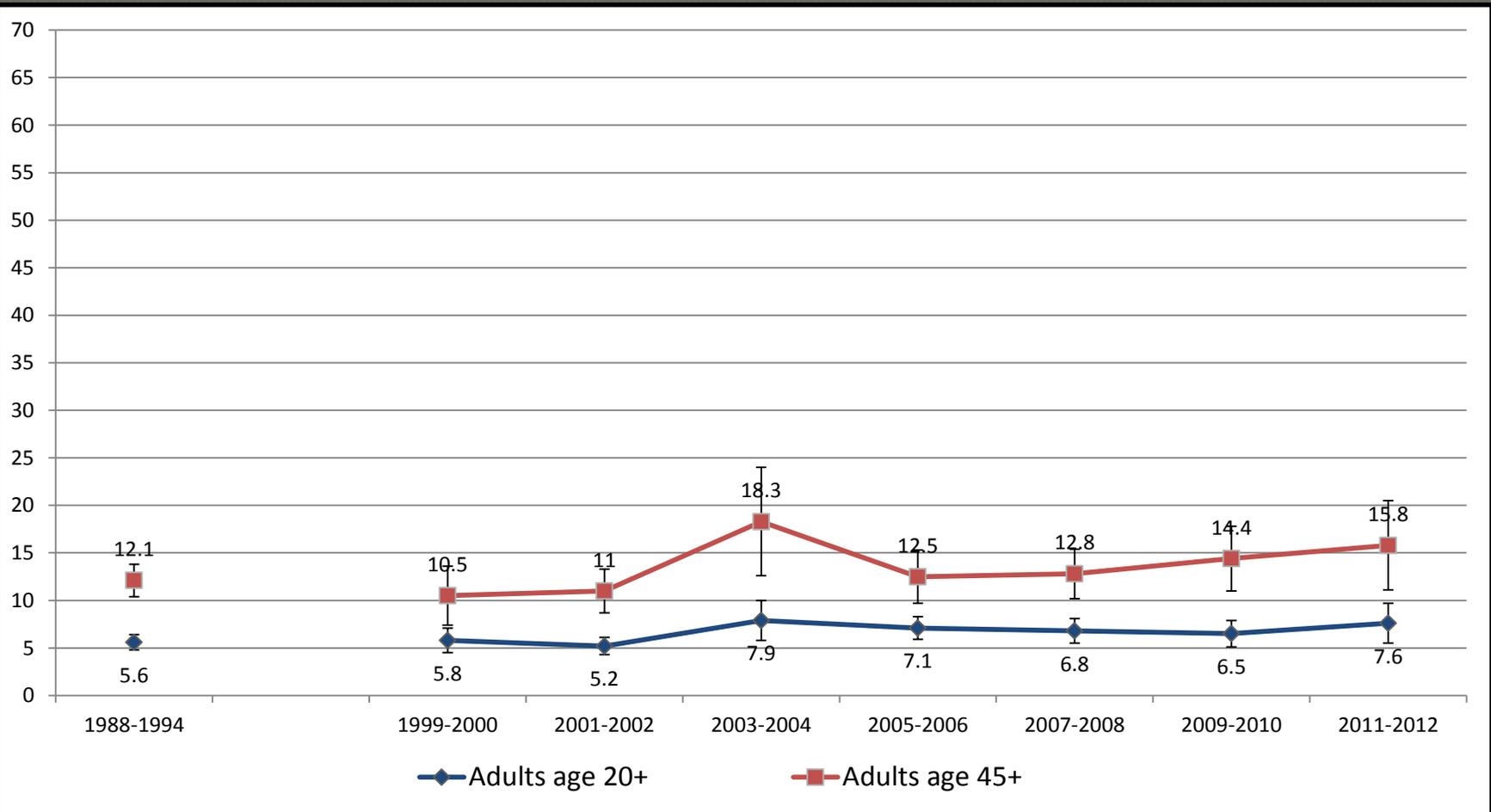
- Data were weighted and accounted for complex sampling design using SUDAAN 11.0
- Prevalence estimates of prediabetes
- Trend analysis: 1999-2012 data using logistic regression for trends in prediabetes and abdominal obesity
 - Time modeled as a continuous variable
- Prediabetes and Abdominal Obesity: T-tests to calculate mean difference in BMI, waist circumference, and WHR between individuals with and without prediabetes
- Forced logistic regression using 2011-2012 data to assess impact of WC and WHR on prediabetes

Prevalence of Prediabetes for Healthy Weight Adults Age 20+ and 45+



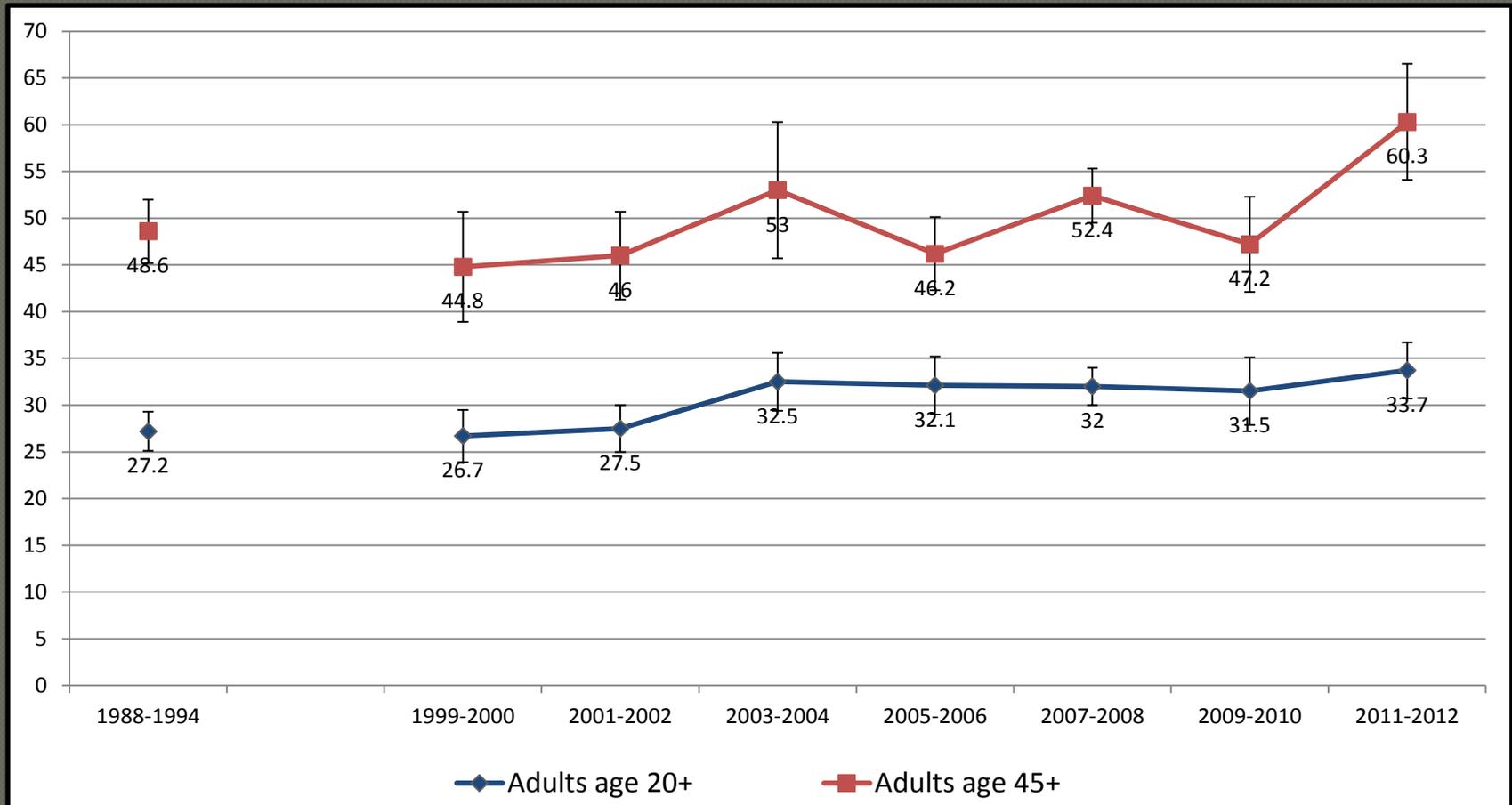
$p < .0001$

Prevalence of Unhealthy Waist Circumference for Healthy Weight Adults Age 20+ and 45+



P=.38

Prevalence of Unhealthy Waist to Height Ratio for Healthy Weight Adults age 20+ and 45+



P=.01

Odds Ratios for Abdominal Obesity on Prediabetes

	Unadjusted OR (95% CI)	Adjusted OR (95% CI)*
Age 20 and older		
Unhealthy Waist Circumference	2.30 (0.93-5.72)	1.03 (0.41-2.60)
Unhealthy Waist-to-height Ratio	2.58 (1.63-4.10)	1.01 (0.60-1.68)
Age 45 and older		
Unhealthy Waist Circumference	1.27 (0.46-3.54)	.95 (0.40-2.27)
Unhealthy Waist-to-height Ratio	1.40 (0.90-2.18)	1.00 (0.60-1.66)

*Controls for age, sex, race/ethnicity, education, poverty-to-income ratio, health insurance and presence of a first degree relative with diabetes.

Discussion

- Prediabetes prevalence has increased over time among healthy weight adults
- Abdominal obesity has increased by one measure, waist to height ratio, in the same time frame but abdominal obesity does not seem to be the key to prediabetes
- Sedentary lifestyle has increased during the same time

Limitations

- Different sampling methodologies between NHANES III and Continuous NHANES
- Unable to explain apparent decrease in prediabetes in data that occurs between 1988-1994 data and 1999-2008 data.
- Unable to assess difference between ethnic groups
- Only use HbA1c to assess prediabetes

Conclusion

- Prediabetes is quite prevalent among individuals with a healthy BMI (33% of individuals 45 and older)
- Many individuals with a healthy BMI who have prediabetes may not be caught under current screening guidelines
- Reconsideration of screening recommendations may be in order

