National Diabetes Statistics Report, 2014

Estimates of Diabetes and Its Burden in the United States

This document is intended to provide up-to-date scientific data and statistics on diabetes and its burden in the United States. Formerly referred to as the National Diabetes Fact Sheet, this consensus document is written for a scientific audience.

FAST FACTS ON DIABETES

29.1 million people or 9.3% of the U.S. population have diabetes.

DIAGNOSED
21.0 million people

UNDIAGNOSED
8.1 million people
(27.8% of people with diabetes are undiagnosed).

All ages, 2012

Diagnosed and undiagnosed diabetes among people aged 20 years or older, United States, 2012

	Number with diabetes (millions)	Percentage with diabetes (unadjusted)
Total		
20 years or older	28.9	12.3
By age		
20–44	4.3	4.1
45–64	13.4	16.2
65 years or older	11.2	25.9
By sex		
Men	15.5	13.6
Women	13.4	11.2

Source: 2009–2012 National Health and Nutrition Examination Survey estimates applied to 2012 U.S. Census data.

National Center for Chronic Disease Prevention and Health Promotion
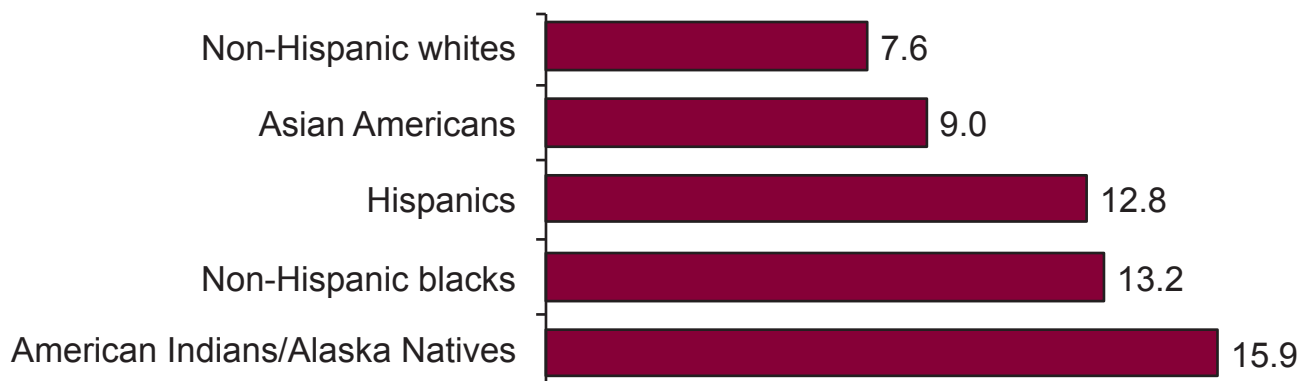Division of Diabetes Translation

CDC

Epidemiologic estimation methods

The estimates in this document, unless otherwise indicated, were derived from various data systems of the Centers for Disease Control and Prevention (CDC), the Indian Health Service's (IHS) National Patient Information Reporting System (NPIRS), the U.S. Renal Data System of the National Institutes of Health (NIH), the U.S. Census Bureau, and published studies. The estimated percentages and the total number of people with diabetes and prediabetes were derived from 2009–2012 National Health and Nutrition Examination Survey (NHANES), 2010–2012 National Health Interview Survey (NHIS), 2012 IHS data, and 2012 U.S. resident population estimates. Diagnosed diabetes was determined by self-report among survey respondents and by diagnostic codes for American Indians and Alaska Natives. Both fasting glucose and hemoglobin A1C (A1C) levels were used to derive estimates for undiagnosed diabetes and prediabetes. The tests used to diagnose diabetes vary in who they identify as having diabetes or prediabetes. Detailed information is available about the data sources, methods, and references (http://www.cdc.gov/diabetes/pubs/references14.htm). More information is available about the tests that are used to diagnose diabetes and the test limitations (http://diabetes.niddk.nih.gov/dm/pubs/comparingtests/index.aspx).

Racial and ethnic differences in diagnosed diabetes among people aged 20 years or older, United States, 2010–2012

Age-adjusted* percentage of people aged 20 years or older with diagnosed diabetes, by race/ethnicity, United States, 2010–2012

Race/ethnicity	Percentage
Non-Hispanic whites	7.6
Asian Americans	9.0
Hispanics	12.8
Non-Hispanic blacks	13.2
American Indians/Alaska Natives	15.9

*Based on the 2000 U.S. standard population.
Source: 2010–2012 National Health Interview Survey and 2012 Indian Health Service's National Patient Information Reporting System.

- Among Hispanic adults, the age-adjusted rate of diagnosed diabetes was 8.5% for Central and South Americans, 9.3% for Cubans, 13.9% for Mexican Americans, and 14.8% for Puerto Ricans.
- Among Asian American adults, the age-adjusted rate of diagnosed diabetes was 4.4% for Chinese, 11.3% for Filipinos, 13.0% for Asian Indians, and 8.8% for other Asians.
- Among American Indian and Alaska Native adults, the age-adjusted rate of diagnosed diabetes varied

New cases of diagnosed diabetes among people aged 20 years or older, United States, 2012

	Number of new diabetes cases	Rate of new diabetes cases per 1,000 (unadjusted)
Total		
20 years or older	1.7 million	7.8
By age		
20–44	371,000	3.6
45–64	892,000	12.0
65 years or older	400,000	11.5

Source: 2010–2012 National Health Interview Survey, 2009–2012 National Health and Nutrition Examination Survey, and 2012 U.S. Census data.

Prediabetes among people aged 20 years or older, United States, 2012

- In 2009–2012, based on fasting glucose or A1C levels, 37% of U.S. adults aged 20 years or older had prediabetes (51% of those aged 65 years or older). Applying this percentage to the entire U.S. population in 2012 yields an estimated 86 million Americans aged 20 years or older with prediabetes.

- On the basis of fasting glucose or A1C levels, and after adjusting for population age differences, the percentage of U.S. adults aged 20 years or older with prediabetes in 2009–2012 was similar for non-Hispanic whites (35%), non-Hispanic blacks (39%), and Hispanics (38%).

### Diagnosed diabetes among people younger than 20 years, United States, 2012

- About 208,000 people younger than 20 years have diagnosed diabetes (type 1 or type 2). This represents 0.25% of all people in this age group. Estimates of undiagnosed diabetes are not available for this age group.

New cases of diagnosed diabetes among people younger than 20 years, United States, 2008–2009

SEARCH for Diabetes in Youth is a multicenter study funded by CDC and NIH to examine diabetes (type 1 and type 2) among children and adolescents in the United States. SEARCH findings for the communities studied include the following:

- During 2008–2009, an estimated 18,436 people younger than 20 years in the United States were newly diagnosed with type 1 diabetes annually, and 5,089 people younger than 20 years were newly diagnosed with type 2 diabetes annually.

- Compared with other groups, non-Hispanic white children and adolescents had the highest rate of new cases of type 1 diabetes.

- While still uncommon, the rates of new cases of type 2 diabetes were greater among people aged 10–19 years than in younger children, with higher rates among U.S. minority populations than in non-Hispanic whites.

Rate of new cases of type 1 and type 2 diabetes among people younger than 20 years, by age and race/ethnicity, 2008–2009
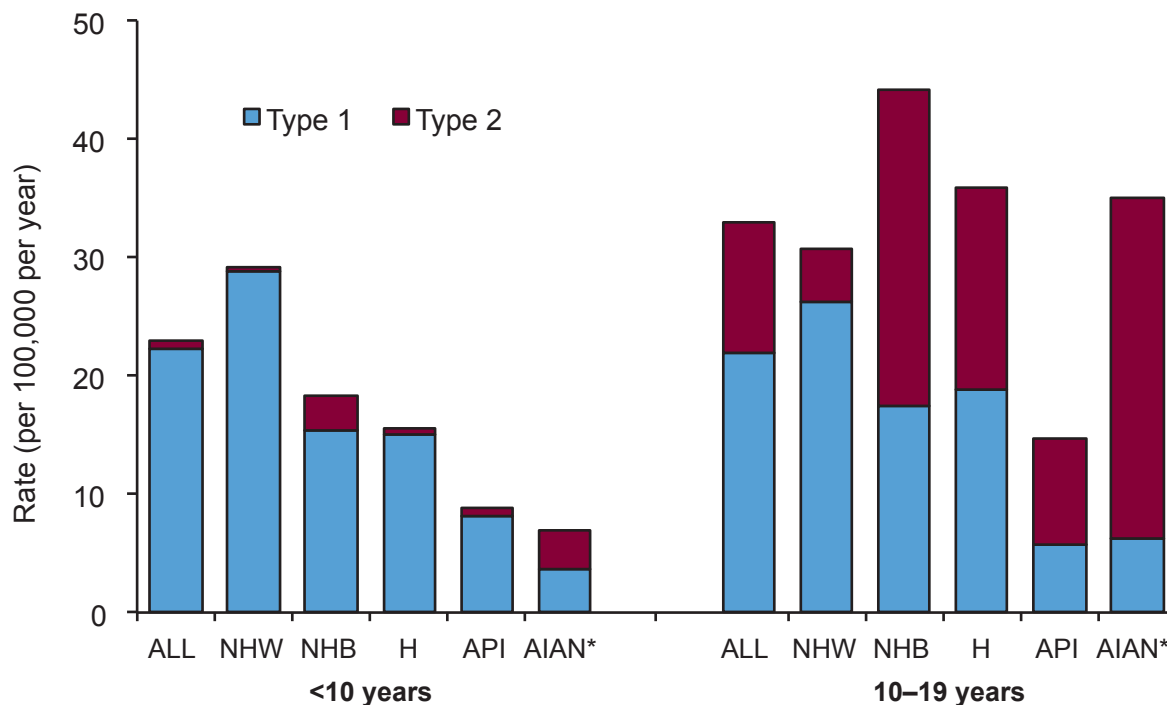
* The American Indian/Alaska Native (AI/AN) youth who participated in the SEARCH study are not representative of all AI/AN youth in the United States. Thus, these rates cannot be generalized to all AI/AN youth nationwide.
Source: SEARCH for Diabetes in Youth Study
NHW=non-Hispanic whites; NHB=non-Hispanic blacks; H=Hispanics; API=Asians/Pacific Islanders;
AIAN=American Indians/Alaska Natives.

Managing diabetes

Diabetes can be treated and managed by healthful eating, regular physical activity, and medications to lower blood glucose levels. Another critical part of diabetes management is reducing cardiovascular disease risk factors, such as high blood pressure, high lipid levels, and tobacco use. Patient education and self-care practices also are important aspects of disease management that help people with diabetes stay healthy.

- People with type 1 diabetes must have insulin delivered by injection or a pump to survive.

- Many people with type 2 diabetes can control their blood glucose by following a healthy meal plan and a program of regular physical activity, losing excess weight, and taking medications. Medications for each individual with diabetes will often change during the course of the disease. Insulin also is commonly used to control blood glucose in people with type 2 diabetes.

- Blood glucose control reduces the risk of developing the eye, nerve, and kidney complications of diabetes.

- Hypoglycemia or low blood glucose is a complication of diabetes treatment with insulin or certain oral medications that can have serious consequences such as seizures, unconsciousness, or death. Older patients with type 2 diabetes and children with type 1 diabetes are at particularly high risk for adverse outcomes associated with hypoglycemia.

- Individual blood glucose targets, with the selection of targets based on the potential risks and benefits to the patient, are encouraged for people with diabetes.
- Self-management education or training focuses on self-care behaviors, such as healthy eating, being active, adhering to medications, learning coping skills, and monitoring blood glucose.
- Many people with diabetes also need to take medications to control their blood pressure and to control their cholesterol.

Treatment of diabetes among people aged 18 years or older with diagnosed diabetes, United States, 2010–2012

	Number of adults using diabetes medication* (millions)	Percentage using diabetes medication (unadjusted)
Insulin only	2.9	14.0
Both insulin and oral medication	3.1	14.7
Oral medication only	11.9	56.9
Neither insulin nor oral medication	3.0	14.4

*Does not add to the total number of adults with diagnosed diabetes because of the different data sources and methods used to obtain the estimates.
Source: 2010–2012 National Health Interview Survey.

Co-existing conditions and complications among people with diagnosed diabetes

Diabetes can affect many parts of the body and is associated with serious complications, such as heart disease and stroke, blindness, kidney failure, and lower-limb amputation. Some complications, especially microvascular (e.g., eye, kidney, and nerve) disease, can be reduced with good glucose control. Also, early detection and treatment of complications can prevent progression, so monitoring with dilated eye exams, urine tests, and foot exams is essential. Because the risk of cardiovascular disease is increased in diabetes and prediabetes, blood pressure and lipid management, along with smoking cessation, are especially important. By working together, people with diagnosed diabetes, their support network, and their health care providers can reduce the occurrence of these and other complications.

Hypoglycemia and hyperglycemic crisis

Hypoglycemia

- In 2011, about 282,000 emergency room visits for adults aged 18 years or older had hypoglycemia as the first-listed diagnosis and diabetes as another diagnosis.

Hyperglycemic crisis

- In 2011, about 175,000 emergency room visits for people of all ages had hyperglycemic crisis, e.g., diabetic ketoacidosis and hyperglycemic hyperosmolar state, as the first-listed diagnosis.
- In 2010, among adults aged 20 years or older, hyperglycemic crisis caused 2,361 deaths.

High blood pressure

- In 2009–2012, of adults aged 18 years or older with diagnosed diabetes, 71% had blood pressure greater than or equal to 140/90 millimeters of mercury or used prescription medications to lower high blood pressure.

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