Type 2 diabetes, formerly known as adult diabetes or non-insulin dependent diabetes, occurs when the body does not produce enough or cannot utilize insulin properly. Type 2 diabetes accounts for 90-95% of all persons diagnosed with diabetes. Risk factors for type 2 diabetes include family history of diabetes, obesity, physical inactivity, older age, prior history of gestational diabetes, impaired glucose tolerance, and race/ethnicity. African Americans, Hispanic/Latino Americans, American Indians, and some Asian Americans and Pacific Islanders are at particularly high risk for type 2 diabetes.

Gestational diabetes develops in 2-5% of all pregnancies but usually disappears when a pregnancy is over. Women who have had gestational diabetes are at increased risk for later developing type 2 diabetes.

Other specific types of diabetes result from specific genetic syndromes, surgery, drugs, infections, and other illnesses and account for a small percent of diagnosed cases of diabetes.

Can diabetes be prevented? Is there a cure?
No cure exists. A number of studies have shown that regular physical activity can significantly reduce the risk of developing type 2 diabetes. Obesity is also a major risk factor for type 2 diabetes. Researchers continue to make progress in identifying the exact genetics and “triggers” that cause some individuals to develop diabetes. Hopefully, one day, we’ll know how to cure, or better yet, prevent diabetes. Still there are many ways to control diabetes to prevent or slow other complications.

Can I do something about my diabetes?
Yes! Proper diagnosis, treatment and self-management, particularly checking one’s blood sugar at least daily, are necessary to prevent or reduce long-term effects of diabetes.

What is diabetes and what does it do?
Carbohydrates in the foods we eat are changed into glucose, or blood sugar, which is used by the body for energy. Insulin, a hormone that allows the glucose to get into the cells of the body, is produced by the pancreas. When a person has diabetes the body either does not produce enough insulin or cannot use the insulin it produces effectively. This causes glucose to build up in the blood. Uncontrolled diabetes can cause serious health complications including heart disease, stroke, kidney failure, blindness, and result in amputations of the lower extremities.

What are the symptoms of diabetes?
A person with diabetes might have SOME or NONE of the following symptoms:
- Frequent urination
- Excessive thirst
- Unexplained weight loss
- Extreme hunger
- Sudden vision changes
- Tingling or numbness in hands or feet
- Feeling very tired much of the time
- Very dry skin
- Sores that are slow to heal
- More infections than usual.
People who think they might have diabetes must see a physician for diagnosis.

What are the types of diabetes?
**Type 1 diabetes**, formerly known as insulin-dependent or juvenile onset diabetes, results when the body makes little or no insulin. A person with type 1 diabetes requires insulin injections to stay alive. The cause of type 1 diabetes is often unknown, but may involve genetic, autoimmune or environmental factors.

**Type 2 diabetes**, formerly known as adult diabetes or non-insulin dependent diabetes, occurs when the body does not produce enough or cannot utilize insulin properly. Type 2 diabetes accounts for 90-95% of all persons diagnosed with diabetes. Risk factors for type 2 diabetes include family history of diabetes, obesity, physical inactivity, older age, prior history of gestational diabetes, impaired glucose tolerance, and race/ethnicity. African Americans, Hispanic/Latino Americans, American Indians, and some Asian Americans and Pacific Islanders are at particularly high risk for type 2 diabetes.

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**Can I do something about my diabetes?**
Yes! Proper diagnosis, treatment and self-management, particularly checking one’s blood sugar at least daily, are necessary to prevent or reduce long-term effects of diabetes.
Treatment and management strategies for type 1 and 2 diabetes differ and must be individualized and planned along with psychosocial, and lifestyle issues. The goal is to keep glucose levels as near normal as possible. Training in self-management is essential to the treatment of diabetes.

**Standards of Care**

Recommended guidelines a health care provider will follow for a person with diabetes include:

At each visit the following should be performed:
- Blood pressure check
- Foot exam
- A1C blood test (2-4 times/year)
- Blood sugar & log record review

At least once a year the following should be performed:
- Dilated eye exam
- Cholesterol/total lipid profile
- Flu shot
- Dental exam/Periodontal exam

The following will be performed as indicated:
- Urine kidney test
- Pneumonia shot

Discuss with a health care provider:
- Diet/exercise
- Weight control
- Smoking cessation
- Use of medications

For more information about diabetes, contact the following organizations or visit their websites:

**Centers for Disease Control and Prevention**

**American Diabetes Association**
1316 Parkade Blvd.
Columbia, Missouri 65203
1-888-342-2383 (1-888-DIABETES)
- Take the Risk Test!

**Juvenile Diabetes Research Foundation International**
[http://www.jdrf.org](http://www.jdrf.org)

**National Institutes of Diabetes and Digestive and Kidney Diseases**

**National Heart, Lung, and Blood Institute (NHLBI)**

**National Diabetes Education Program**

For additional resources, visit the Missouri Diabetes Prevention and Control Program’s web page at:
[http://www.dhss.mo.gov/diabetes/](http://www.dhss.mo.gov/diabetes/)

Information for this document was taken from the Centers for Disease Control’s National Center for Chronic Disease Prevention and Health Promotion, “Diabetes Public Health Resource,” website:

Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Department of Health and Senior Services at 1-800-316-0935. Hearing impaired persons telephone 1-800-735-2966.

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