Seize the moment of excited curiosity on any subject to solve your doubts, for if you let it pass, the desire may never return, and you may remain ignorant.

—William Wirt (1772–1834)

The Diabetes Prevention Program has removed any doubt about the importance of weight and physical activity on the development of diabetes. I believe that we have crossed an important threshold and, as a country, are recognizing that too many people are overweight and obese and are too inactive. But most of us do not know how to make the lifestyle changes necessary or may simply be unwilling to make the necessary changes to deter this epidemic.

I do still believe, however, that many remain ignorant regarding the overall impact of their current lifestyle behaviors. They believe, “It can’t happen to me.” The general public does not associate diabetes, heart disease, strokes, and the other complications of metabolic syndrome with something they can alter: their lifestyle.

Metabolic syndrome is not new. But our understanding of it has grown, and its relationship to the complications of diabetes has been further elucidated. Metabolic syndrome is a constellation of abnormalities including type 2 diabetes, hypertension, obesity, polycystic ovarian syndrome, dyslipidemia, prothrombotic state, and proinflammatory state. The list of abnormalities associated with metabolic syndrome continues to grow with further study. Originally, it was called “Syndrome X,” and included only four components: insulin resistance, type 2 diabetes, hypertension, and obesity. Regardless of the name we give this syndrome, the link is the same: increased weight and decreased activity.

You and I, as diabetes health care professionals, know the importance of the message regarding increasing physical activity and decreasing weight. We care for people with diabetes every day. We know the risks of obesity and a sedentary lifestyle. Still, given the continuing epidemic and especially its growth among young people, a brief review of the current situation is warranted.

The statistics regarding diabetes and children are astounding. Without change in our current lifestyles, 33% of boys and 39% of girls born in 2000 will develop diabetes. Hispanic boys and girls have a 45 and 53% risk, respectively. African-American boys and girls have a 40 and 45% risk, respectively, of developing diabetes.

Meanwhile, our peers decrease their life expectancy with the development of diabetes. A 40-year-old man diagnosed with diabetes today loses 12 years of life expectancy; a woman of the same age loses 14 years. Our parents have a 1-in-10 risk of developing diabetes at age 70. This epidemic affects everyone.

I contend that we must seize the moment not only to treat diabetes, but also to prevent it. Our time with patients is limited, whether in the clinic or the classroom. But I challenge you to seize the moment to treat the at-risk family members of your patients with diabetes. We cannot pretend ignorance or turn a blind eye any longer.

If at-risk family members come to the clinic with your patients, I encourage you to interact with them directly. If your patients with diabetes come to their appointments alone, I encourage you to talk to them about their family’s risk factors. We have always encouraged family participation in support of people with diabetes. Now, we must encourage our patients with diabetes to participate in helping their families take steps (literally!) to alter their potential for developing diabetes. It is important for at-risk individuals to know that the normal fasting blood glucose level is <100 mg/dl. It is important for them to know that prediabetes or impaired fasting glucose is 100–125 mg/dl. Individuals at risk need to know that they can change their future by making lifestyle changes now, in the present.

The American Diabetes Association has recently released a new educational series titled “Weight Loss Matters,” which is an education initiative to help Americans shed pounds. The series includes five brochures covering the connection between weight and diabetes, how to identify your healthy weight, weight loss tips, portion control, and activity options. Ordering information is available online from the Association’s Web site at www.diabetes.org/weightlossmatters.

Seizing the moment to encourage patients to encourage their families in the prevention of diabetes and metabolic syndrome may give patients’ at-risk relatives renewed energy to increase their steps and decrease their portion sizes. Until now, we have been giving our patients with diabetes the message that weight maintenance is an acceptable goal. But if we are going to have an impact on this epi-

Seize the Moment

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demic and on the life expectancy and quality of life of our children and grandchildren, we must seize the moment to carry a different message: that weight loss (and increased activity) matters.

References

