

Diabetes in Minnesota

Common types of diabetes

Type 1 develops when the pancreas (an organ near your stomach) stops making insulin. Type 1 often starts in childhood, but it can also develop in adults.1

Type 2 develops when the body can no longer use insulin or the pancreas does not produce enough insulin to manage blood sugar levels. Type 2 diabetes is on the rise worldwide. About 90-95% of all diabetes cases are type 2.1 Most cases occur among adults.

Gestational diabetes affects people during pregnancy and usually goes away after pregnancy. Between 2-10% of women have gestational diabetes during pregnancy.²

How many adults in Minnesota have diabetes?

In 2020, 8.8% of Minnesota adults (about 390,000) had been diagnosed with diabetes (type 1 or 2)3. Around 24,000 new cases are diagnosed in Minnesota each year (2018).³

Nationally, around 11% of people with diabetes do not know they have the disease.4

Including people who do not know they have diabetes, the true percentage of adults with diabetes in Minnesota may be closer to 10%.

Who is at risk for type 1 diabetes?

Inherited genetic risk factors can increase the risk of type 1 diabetes, but specific

causes or means of prevention remain unknown. A family history of type 1 may put a person at greater risk of type 1.1

Who's at risk for type 2 diabetes?

Older adults: Diabetes is more common among older adults.4

> Percentage of adults diagnosed with diabetes in Minnesota by Age (2020)³

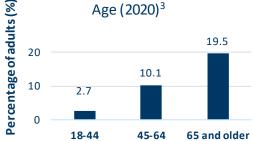


Table 1: Percentage of adults diagnosed with diabetes in Minnesota by age (2020)3

Age	Percentage of adults diagnosed with diabetes
18 – 44	2.7
45-64	10.1
65 and older	19.5

- People with a family history of diabetes1: Lifestyle patterns like diet and exercise, as well as genetics, can play a role.1
- Adults who with obesity or who are overweight: In 2020, 67.3% of Minnesota adults had obesity or were overweight.3
- People with low levels of physical activity1: In 2019, only 25.5% of Minnesota adults regularly got all

recommended physical activity, which includes muscle strengthening and aerobic activity.³

- Women who had gestational diabetes¹: About 50% of women with gestational diabetes develop type 2 diabetes later in life.² In 2019, 7.4% of births in Minnesota were by mothers with gestational diabetes.
- Adults with cardiovascular disease and cardiovascular risk factors¹: In 2019, 26.1 % of Minnesota adults reported a high blood pressure diagnosis and 25.6% had high cholesterol.³
- Adults with prediabetes¹: In 2020, 8.7% of adults in Minnesota had diagnosed prediabetes, but as many as one in three adults may have prediabetes.^{3,4} Without lifestyle changes, many people with prediabetes could develop type 2 diabetes within five years.⁵

Are diabetes rates increasing?

Minnesota diabetes rates increased between 2000 and 2019, and diabetes prevalence in the state was at a record high in 2020.6

Increases may be due to: people with diabetes living longer, healthier lives than before; improved detection of diabetes; aging population and changing demographics *(these effects were minimized in the graph and chart by ageadjusting); changes in diagnostic criteria; or

increasing rates of obesity and risk factors.

Age-adjusted percentage of Minnesota adults with diabetes by

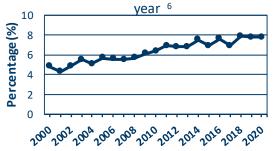


Table 2: Age-adjusted percentage of Minnesota adults with diabetes for selected years 6

Year	Percentage of adults diagnosed with diabetes
2002	4.9
2005	5.7
2008	5.7
2011	6.9
2014	7.5
2017	6.9
2020	7.8

Some racial and ethnic groups experience higher rates of type 2 diabetes, particularly African-Americans, Latinx people, American Indians, and Pacific Islander/Asian Americans. 1,4

Diabetes is increasing in young people.

Diabetes is much less common in young people (around 0.3% of people under 20⁷, versus 10%-13% of US adults 18 years and older) ⁴. However, rates for all types are rising. A national multi-center study suggests the number of type 2 cases among youth in the US nearly doubled between 2001-17.⁷

DIABETES IN MINNESOTA FACT SHEET

Obesity and physical activity are the only factors involved in increasing diabetes rates that can be managed to lower risk.

References

¹ NIDDK. <u>What is Diabetes?</u> (https://www.niddk.nih.gov/health-information/diabetes/overview/what-is-diabetes)

² CDC. <u>Gestational Diabetes</u> (https://www.cdc.gov/diabetes/basics/gestational.html)

³ CDC, Behavioral Risk Factor Surveillance Survey, MDH analysis (https://www.cdc.gov/brfss/)

⁴ Selvin, E. et al. 2017. <u>Identifying Trends in Undiagnosed Diabetes in U.S. Adults by Using a Confirmatory Definition: A Cross-sectional Study. (https://pubmed.ncbi.nlm.nih.gov/29059691/_)</u>

ECDC. About Prediabetes (https://www.cdc.gov/diabetes/prevention/about-prediabetes.html)

© CDC, National Diabetes Surveillance System (https://gis.cdc.gov/grasp/diabetes/DiabetesAtlas.html)

⁷ <u>Trends in Prevalence of Type 1 and Type 2 Diabetes in Children and Adolescents in the US, 2001-2017</u> (https://pubmed.ncbi.nlm.nih.gov/34427600/)

Updated February 2022.

Minnesota Department of Health Diabetes Unit PO Box 64882, St. Paul, MN 55164-0882 651-201-5435 www.health.state.mn.us