

Top Health Groups Organize First National Conference on Cardiovascular Disease and Diabetes Among American Indians and Alaska Natives

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DENVER – May 9, 2005 – A coalition of leading health organizations today announced the first national conference to address cardiovascular disease and diabetes within the American Indian and Alaska Native (AI/AN) communities. The AI/AN conference will focus on increasing the knowledge of healthcare providers, tribal community members and leaders, and urban community health leaders on the link between diabetes and cardiovascular disease (CVD) and how to integrate treatment and prevention of these closely related diseases.

More than 700 healthcare providers, tribal community members/leaders, federal and state health policy makers, and urban and community health leaders will attend the conference which will be held May 16-19, 2005 at the Adam's Mark Hotel, 1550 Court Place in Denver.

CVD has become a leading health issue among AI/AN over the past several decades. According to the Strong Heart Study, in these populations CVD occurs at rates almost twice that of the general U.S. population. In addition, according to the Centers for Disease Control and Prevention (CDC), diabetes has been a major public health concern among AI/AN communities in the United States for the past 50 years. On average, AI/AN adults are 2.2 times more likely to have diabetes than non-Hispanic whites of similar age. A recent report by the Indian Health Service (IHS) revealed a 106 percent increase in diabetes among adolescent AI/AN measured over an 11 year period, raising concerns about the impact of diabetes on future generations and highlighting the urgent need for immediate preventive interventions.

“Cardiovascular disease has become the leading cause of death of American Indians and Alaska Natives,” said James M. Galloway, M.D., F.A.C.P., F.A.C.C., Director of the Native American Cardiology Program and senior cardiologist for the IHS. “Diabetes is the most important risk factor. In addition, the roles of high cholesterol, high blood pressure and tobacco abuse must be addressed both in those with diabetes and others.”

“Cardiovascular disease is one of the most serious complications of diabetes,” said Kelly Acton, M.D., M.P.H., F.A.C.P., Director of the IHS Division of Diabetes Treatment and Prevention. “The meeting will assist Tribes in their efforts to effectively prevent these problems, as well as to treat them in people already diagnosed with them.”

“This conference offers the opportunity not only for healthcare professionals to discuss the latest diabetes and CVD prevention and treatment methods but also to work together with tribal leaders to spread the word among the American Indian and Alaska Native populations about ways to curb the epidemics of type 2 diabetes and CVD,” said Richard S. Beaser, M.D., Medical Executive Director of Joslin Diabetes Center’s Professional Education Program (in Boston) and a co-chair of the conference steering committee.

“American Indians and Alaska Natives appear to have developed the highest rates of cardiovascular disease within the U.S.,” said Alice K. Jacobs, M.D., F.A.H.A., President, American Heart Association. “Culturally competent and appropriate interventions are needed to overcome these healthcare burdens and disparities. At this conference the American Heart Association and the Indian Health Service will solidify our mutual partnership and support for the prevention of heart disease and stroke through the signing of an official Memorandum of Understanding between our two organizations.”

“As tribal leaders, we must take a proactive stand and provide interventions that will help to combat the devastating effects of cardiovascular disease. No longer can we look at diabetes as being the single most significant health enemy of our people” said Judy Goforth Parker, RN, PhD, Alternate Chair of the Tribal Leaders Diabetes Committee and Professor, East Central University. “Cardiovascular disease and the other risk factors associated with it also cannot be ignored.”

Almost all cases of diabetes among AI/AN people are type 2, the most common form of the disease, and are associated with modifiable risk factors such as obesity and physical inactivity. Therefore, prevention has become an increasingly important goal for these communities. Although there are significant challenges in dealing with the related epidemics of diabetes and cardiovascular disease, there are many new tools and strategies that can strengthen clinical, public health, and community approaches to solving the problem of diabetes.

The four-day conference will highlight some of these tools and strategies including using nutrition and physical activity approaches, smoking cessation strategies, behavioral adaptations, the latest medications and evidence-based treatments. The conference also will provide practitioners with an overview of the latest scientific, clinical, laboratory and public health findings related to CVD and diabetes prevention and treatment.

Additionally, cultural disparities in CVD and diabetes prevention among AI/AN populations will be documented in a new publication titled, the *Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives*. This CDC and IHS collaboration documents geographic disparities in the burden of heart disease and stroke mortality and risk factors among AI/AN. This publication is the fourth in a series of CDC atlases related to heart disease and stroke and the first to focus on geographic patterns of heart disease and stroke mortality and risk factors for a specific racial/ethnic group in the United States.

“The serious geographic disparities in heart disease and stroke mortality and risk factors among American Indians and Alaska Natives documented in this *Atlas* highlight the need for prevention programs and policies to be tailored to the social, cultural and physical characteristics of local communities,” stated Michele Casper, PhD, lead author of the *Atlas*, and Epidemiologist, Cardiovascular Health Program, CDC.

ABOUT CARDIOVASCULAR DISEASE (CVD)

Heart disease and stroke are generally the result of the build up of fat and cholesterol in the arteries that feed the heart and the brain. The major modifiable risk factors for this build up - and subsequent CVD - include obesity, physical inactivity, high blood pressure, high cholesterol, tobacco abuse, and importantly, diabetes.

ABOUT TYPE 2 DIABETES

Type 2 diabetes is the most common form of diabetes. It occurs when the body does not produce enough insulin or efficiently use the insulin it makes. Insulin is necessary for the body to be able

to use sugar. Sugar is the basic fuel for the cells in the body and comes from the breakdown of the foods we eat. It is insulin's job to take sugar from the blood and move it into the cells. If insulin isn't working properly, then sugar builds up in the blood instead of going into cells. This can cause cells to become starved for energy. And over time, high blood sugar levels may hurt the heart, eyes, kidneys, or nerves.

ABOUT THE COALITION

The program is presented by The Tribal Leaders Diabetes Committee, The IHS and Joslin Diabetes Center, in conjunction with the American Heart Association/American Stroke Association; The National Heart, Lung, and Blood Institute; the National Institute of Diabetes and Digestive and Kidney Diseases; the U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion; American Diabetes Association; InterTribal Council of Arizona; CDC; and the American College of Cardiology.

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For more information on the conference please visit www.ProfessionalEd.Joslin.org or contact Marge Dwyer at Joslin Communications Office at (617) 732-2415 or at marjorie.dwyer@joslin.harvard.edu.

American Indians and Alaska Natives Health Disparities Fact Sheet

- Cardiovascular disease (CVD) is a leading cause of health disparities between American Indians/Alaska Natives (AI/AN) and the general U.S. populations.
- Heart disease is the leading cause of death among AI/AN and stroke is the sixth leading cause of death.
- With compliance, current interventions for those who have heart disease are effective in reducing the rate of death or recurrent events by up to 70 percent.
- Diabetes is the fourth-deadliest disease among AI/AN. More than 14 percent of the AI/AN population that receive care from IHS have diabetes. Some AI/AN groups have the highest rate of diabetes in the world.
- It is important to understand the link between these two diseases in AI/AN. Most of the CVD diagnosed in American Indians occurs in people who already have diabetes.
- The most life-threatening consequences of diabetes are heart disease and stroke. People with diabetes have heart disease death rates about two to four times higher than adults without diabetes.
- At least two out of three people with diabetes die from heart disease or stroke, or blood vessel disease.