Translation of the Diabetes Prevention Program

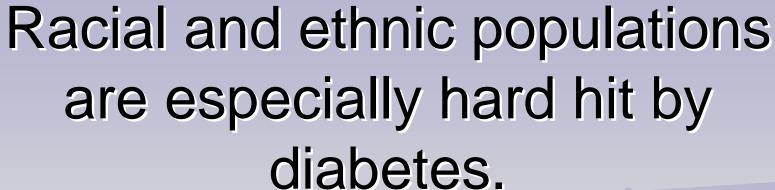
From Medical Research to Public Health

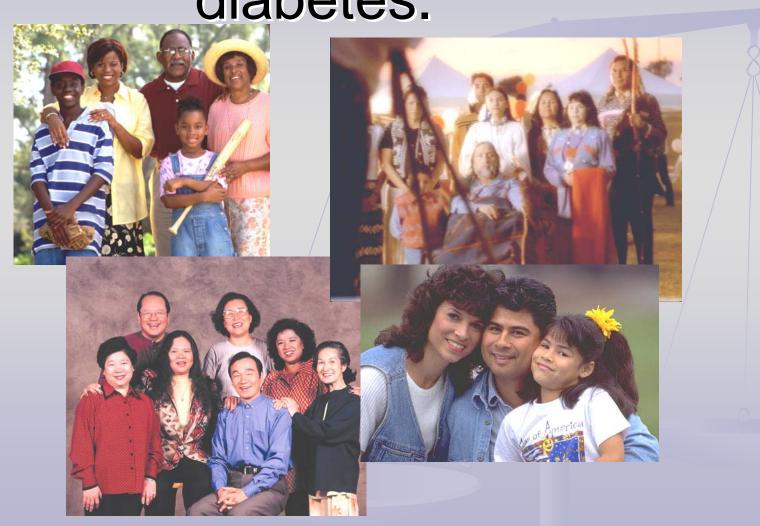
Janet Brown-Friday, RN, MSN, MPH Albert Einstein College of Medicine Diabetes Clinical Trials Unit

Diabetes is the epidemic of our times:

- 18.2 million Americans have diabetes
- 6.3% of adults have diabetes

Diabetes increased 70% among people age 30-39 in the last decade





Diabetes Prevalence in High Risk Groups

- 13% of all African Americans have diabetes.
- In Hispanics prevalence ranges from 2.4% to 26.2% based on age and national origin.
- Asian and Pacific Islanders have a prevalence from 1.5% to 4.9% based on national origin and age.
- American Indian and Alaskan Natives range from 4.4% to 21% according to geographic region.
- Pima Indians prevalence is up to 50% of the population.

About 40 million Americans have pre-diabetes

Pre-diabetes is a condition where blood sugar levels are higher than normal, but not high enough for diabetes.

People with pre-diabetes are at an increased risk for developing diabetes.

Who's at risk for pre-diabetes?

- Age risk increases with age
- Overweight
- High blood pressure
- Abnormal lipid levels
- Family history
- Ethnicity African American, Hispanic/Latino, American Indian/Alaska Native, or Asian American/Pacific Islander
- History of gestational diabetes
- Inactive lifestyle



The Diabetes Prevention Program

A Randomized Clinical Trial to Prevent Type 2 Diabetes in Persons at High Risk



Feasibility of Preventing Type 2 Diabetes

- There is a long period of glucose intolerance that precedes the development of diabetes
- Screening tests can identify persons at high risk
- There are safe, potentially effective interventions that can address modifiable risk factors



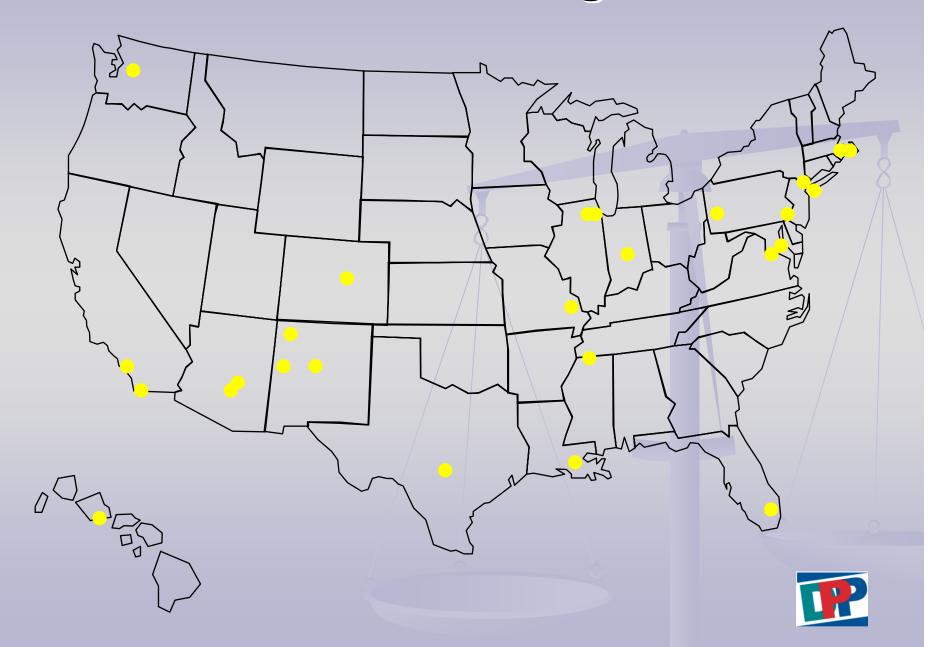
Modifiable Risk Factors for Type 2 Diabetes

- Obesity
- Body fat distribution
- Physical inactivity
- Elevated fasting and 2 hr glucose levels

Study Design

- 3-group randomized clinical trial
- 27 clinical sites
- Standardized across clinics:
 - Common protocol and procedures manual
 - Staff training
 - Data quality control program

Diabetes Prevention Program Clinics



Eligibility Criteria

- Age ≥ 25 years
- Plasma glucose
 - 2 hour glucose 140-199 mg/dl and
 - Fasting glucose 95-125 mg/dl
- Body mass index ≥ 24 kg/m²
- All ethnic groups
 goal of up to 50% from high risk populations



Study Interventions

Eligible participants

Randomized

Standard lifestyle recommendations

Intensive Lifestyle (n = 1079) **Metformin**

(n = 1073)

Placebo

(n = 1082)



Lifestyle Intervention

An intensive program with the following specific goals:

- ≥ 7% loss of body weight and maintenance of weight loss
 - Dietary fat goal -- <25% of calories from fat</p>
 - Calorie intake goal -- 1200-1800 kcal/day
- ≥ 150 minutes per week of physical activity



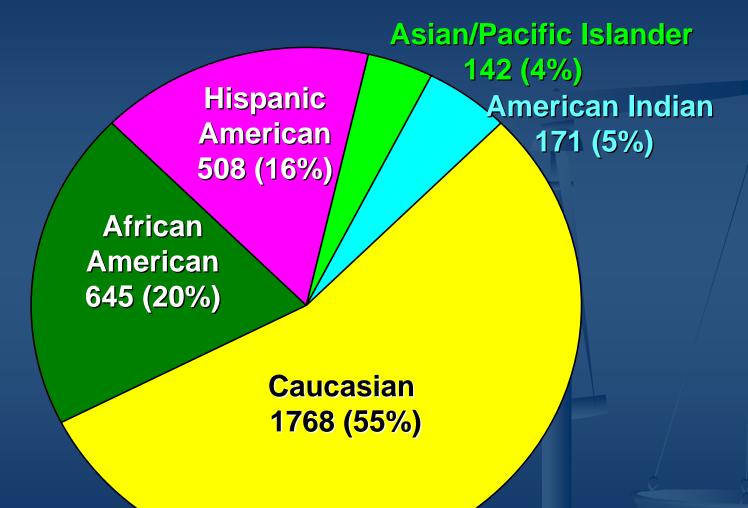
Interventions: Medications

Metformin- 850 mg twice per day

Placebo- Adjusted in parallel with active drugs



DPP Population





The DPP Research Group, Diabetes Care 23:1619-29, 2000

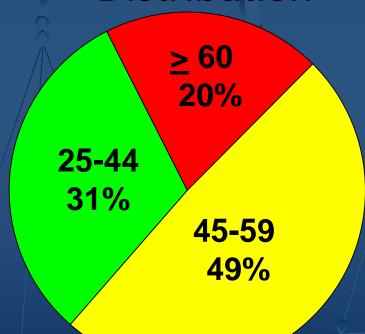
DPP Population



Men 32%

Women 68%

Age Distribution





Demographic and Socioeconomic Characteristics by Sex (2)

	<u>Overall</u>	<u>Male</u>	<u>Female</u>
n	3,234	1,043	2,191
Employment Status *			
Employed	2401 (74.2%)	771 (73.9%)	1630 (74.4%)
Retired	420 (13.0%)	217 (20.8%)	203 (9.3%)
Homemaker	204 (6.3%)	1 (0.1%)	203 (9.3%)
Not employed	121 (3.7%)	33 (3.2%)	88 (4.0%)
Seasonally employed	25 (0.8%)	8 (0.8%)	17 (0.8%)
Student	21 (0.6%)	2 (0.2%)	19 (0.9%)
Other	37 (1.1%)	11 (1.1%)	26 (1.2%)
Never worked	5 (0.2%)	0 (0.0%)	5 (0.2%)

* n, (%)



Demographic and Socioeconomic Characteristics by Sex (3)

	<u>Overall</u>	<u>Male</u>	<u>Female</u>
n	3,234	1,043	2,191
Education in years *			× ×
<13	834 (26%)	221 (21%)	613 (28%)
13 to 16	1556 (48%) 🥋	488 (47%)	1068 (49%)
17 or more	844 (26%)	334 (32%)	510 (23%)
Annual family income			
< \$20,000	446 (14%)	110 (11%)	336 (15%)
\$20,000 to <\$35,000	561 (17%)	146 (14%)	415 (19%)
\$35,000 to <\$50,000	641 (20%)	207 (20%)	434 (20%)
\$50,000 to <\$75,000	646 (20%)	218 (21%)	428 (20%)
> \$75,000	682 (21%)	281 (27%)	401 (18%)
Refused	257 (8%)	81 (8%)	176 (8%)
The DPP Research Group, <i>Di</i>	abetes Care 23:1619	9-29, 2000	* n, (%)

* n, (%)

Retention and Participation

99.6% of the study cohort alive at study end

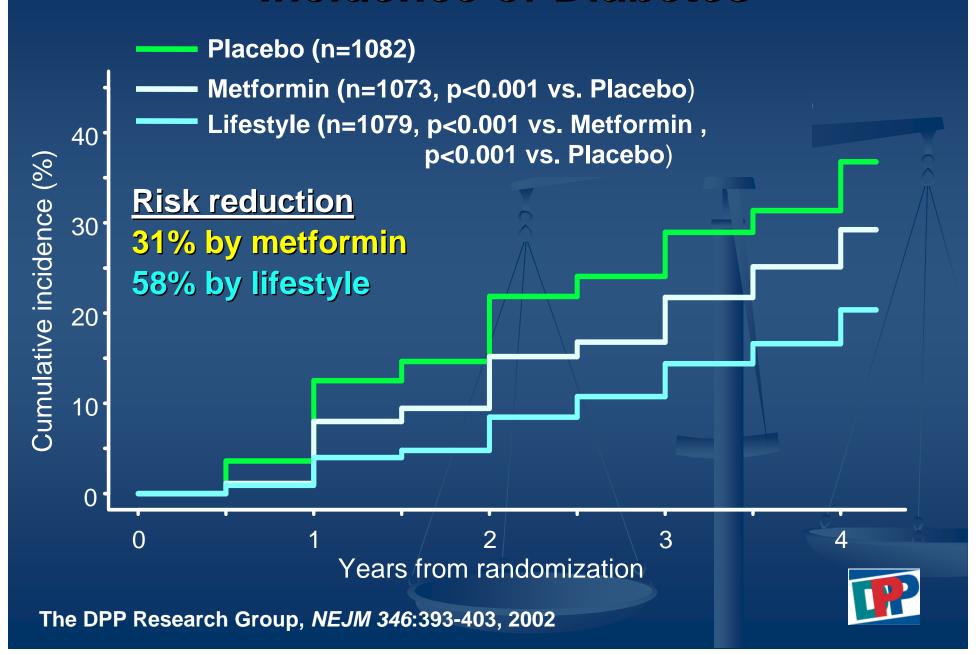
93% completed study

93% of annual visits completed

Average follow-up 2.8 years (range 1.8 - 4.6)



Incidence of Diabetes



Consistency of Treatment Effects

- Lifestyle intervention was beneficial regardless of ethnicity, age, BMI, or sex
- The efficacy of lifestyle relative to metformin was greater in older persons and in those with lower BMI
- The efficacy of metformin relative to placebo was greater in those with higher baseline fasting glucose and BMI



Translation of the DPP

Medical Research

How does one create a balance or a bridge between medical research and the community to communicate the good news?



National Institutes of Health





What does it take to have a successful translation of medical research?

It takes clinical research that:

- Recognizes a need in the community and sets out address a true problem
- Accounts for those truly at risk
- Is purposely inclusive
- Chooses interventions that have the potential for replication.

Diabetes Prevention Program (DPP) Findings

Lose 5 to 7 percent of body weight by:

- Getting 30 minutes of physical activity,5 days a week
- Following a low-fat, low-calorie eating plan









Get Real! You don't have to knock yourself out to prevent diabetes.

A message from the National Diabetes Education Program, sponsored by the ational institutes of Health and the Centers for Disease Control and Prevention





- ✓ Choose foods that are lower in fat. Instead of fried chicken, try it grilled or baked. Instead of french fries or potato chips, slice potatoes, sprinkle them with a little oil, salt, and pepper, and boke them in the own
- ✓ Buy more fruits, vegetables, and whole grain. foods every time you shop. Iry a new fruit or vegetable each week.
- Lighten your recipes by using low-fat or light versions of ingredients such as sour cream, cream cheese, or mayonnaise. Use applesauce nstead of margarine or oil when baking.
- ✓ Make sure you always have a healthy snack. with you in case you get hungry, like an apple, a banana, or a voquet.
- Serving sizes are often smaller than we think. Use this chart as a guide for portion sizes:

Serving sizes are often smaller than we think. Use this chart as a guide for portion sizes:



1/2 cup of rice or pasta = An ice cream scoop



1 1/2 ounces of cheese = Four dice



3 ounces of meat or fish = Deck of cards orcassette tape



2 tablespoons peanut butter = A ping pong ball



Start Your GAME PLAN for Preventing Diabetes. The key to losing weight and preventing diabetes is to make long-term changes that work for you - not quick fixes. These tips are a great way to get you started on your way to preventing diabetes but are only the first steps.

To help you lose weight to prevent diabetes, the National Diabetes Education Program (NDEP) has created "Your GAME PLAN for Preventing Type 2 Diabetes." Order your free copy of the GAME PLAN to learn how to set goals, track your progress, and get more tips to help you reach your goals.

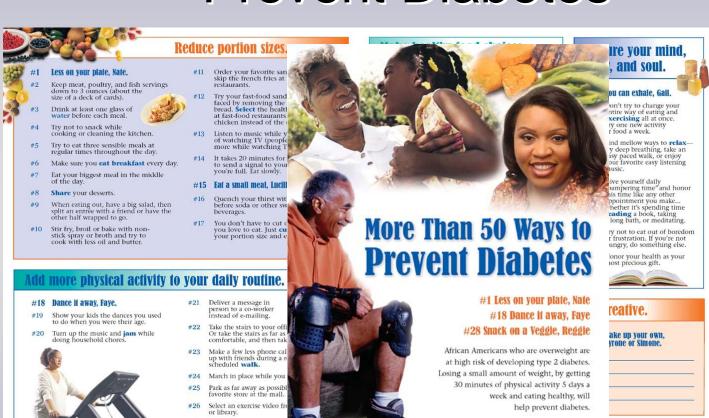
> To get your free GAME PLAN, visit www.ndep.nih.gov or call 1-800-438-5383.



Prevent type 2 Diabetes

big rewards

More than 50 Ways to Prevent Diabetes



Get off the bus one stop the rest of the way home least two days a week.

For more information about diabetes prevention, call 1-800-438-5383 and ask for "More Than 50 Ways to Prevent Diabetes"



www.ndep.nih.gov

A message from the National Diabetes Education Program, spensored by the National Institutes of Health and the Centers for Disease Control and Prevention.



revent type 2 diabetes with ealthy eating and physical ctivity. Discover your own ad share it with your family,

iends and neighbors

Prevengamos la diabetes tipo 2. Paso a Paso.



We Have the Power to Prevent Diabetes





GET HELP. You don't have to prevent diabetes alone. Ask your family and friends to help you out. Involve them in your activities. You can help each other move more, eat less, and live a healthier life. There are groups in your area that can help as well.

"I try to be more active throughout the day. At work, I take the stairs instead of the elevator."

KELLY MOORE, MD CREEK NATION OF OKLAHOMA

KEEP AT IT. Making even small changes is hard in the beginning. Try adding one new change a week. If you get off track, start again and keep at it.

"When I don't think I have time to exercise, I just remember how important it is to be around for my family."

RALPH FORQUERA
IUANEÑO BAND OF CALIFORNIA INDIANS

"We have the power to help our people and the generations to come. We have the Power to Prevent Diabetes."

YVETTE ROUBIDEAUX, MD

smal s bi

small steps big rewards
Provent po2Diabetes

www.ndep.nih.gov

A message from the National Dalbetes Education Program, appropried by the National Institutes of Health and the Centers for Disease Control and Prevention, MIN Publication No. 0

preventing type 2 diabetes



Two Reasons to Prevent Diabetes: My Future and Theirs



It's Not Too Late to Prevent Diabetes. Take Your First Step Today.





Want to start moving more, but don't know how? It doesn't have to be hard or boring to work for you. The Notional Diabetes Education Program (NDEP) is urging adults 60 and over who are at risk for type 2 diabetes, or have a condition called pre-diabetes, to increase their physical activity to prevent diabetes.

If you are not very active, start off slowly with an activity that gets you moving for 10 minutes 5 days a week and build up to the recommended 30 minutes. Moving around, even for only a few minutes a day, is a healthy start to becoming more fit and preventing diabetes.



START NOW to get moving and have fun!

WARM UP. Warm-ups get your body ready for physical activity. Shrug your shoulders, tap your toes, swing your arms, or march in place. Spend a few minutes warming up for any activity, even walking.

DANCE. Dancing increases strength, energy, and movement. It is a fun way to exercise without realizing it. Take a dance class with a buddy. Or get off the couch, turn on the radio and dance in your living room.

WALK. This is one of the best ways to increase your activity. There are many ways to add walking to your day. Be sure you have the proper shoes for walking. Find a safe place to enjoy your walk, such as a shopping mall or a community center.

STRETCH. You don't need a special time or place to stretch. At home or at work, stand up, push your arms toward the ceiling, and stretch. Stretch slowly. You should not feel pain. Hold the stretch without bouncing for about 30 seconds. Stretch after any brisk activity.



EASY STEPS to increase activity

- Put away the TV remote control—get up to change the channel. March in place during commercial breaks.
- Try walking around the house while you talk on the phone.
- Park the car farther away from stores, movie theatres, or your home.
- Get off the bus one stop early, if you are in a safe place to walk.
- Visit museums, the zoo, or an aquarium.
 These are great ways to be active with your family.





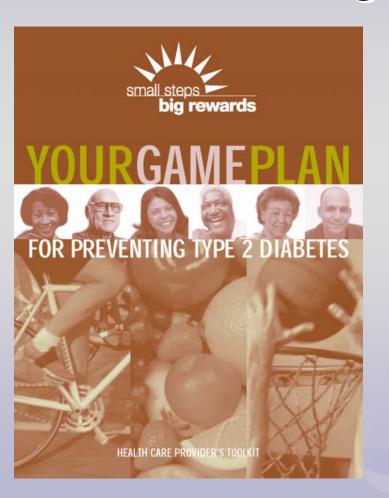
EAT RIGHT to prevent type 2 diabetes!

Making healthy food choices and cutting down on the amount of food you eat will help manage your weight loss and prevent type 2 diabetes. Try some of these tips to get started.

- You don't have to cut out the foods you love to eat. Just cut down on the amount you eat, and eat them less often.
- Try to keep meat, poultry, and fish servings down to three ounces—that's about the size of a deck of cards.
- Try to eat three sensible meals at regular times throughout the day.
- Eat more fresh fruit, veggies, nuts, and whole grains.
- Limit fried foods. Baking and broiling are healthier ways to eat meat, chicken, and fish.
- · When eating out, share large portions.
- Drink six to eight glasses of water every day.



Your GAME PLAN for Preventing Type 2 Diabetes

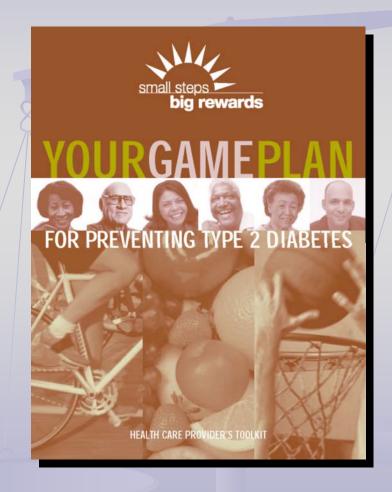


Goals, Accountability, Monitoring, and Effectiveness:

Prevention through a Lifestyle of Activity and Nutrition

GAMEPLAN Toolkit: Materials for Healthcare Providers

- Science behind DPP Clinical Trial
- "Decision Pathway" to help identify atrisk patients
- How to Talk to Patients
- Diabetes PreventionQ&A
- Patient Handouts





GAMEPLAN Toolkit: Materials for Patients

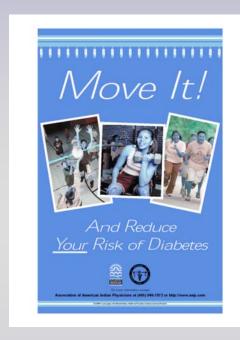
- Overview of the GAMEPLAN
- Risk Assessment Tool
- "Walking... A Step in the Right Direction"
- Food Diary
- Calorie Counter

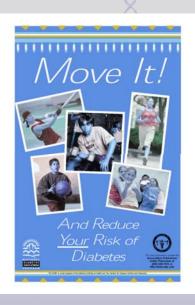


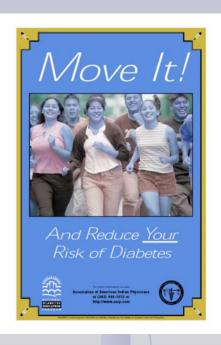
New Initiatives



Community Interventions

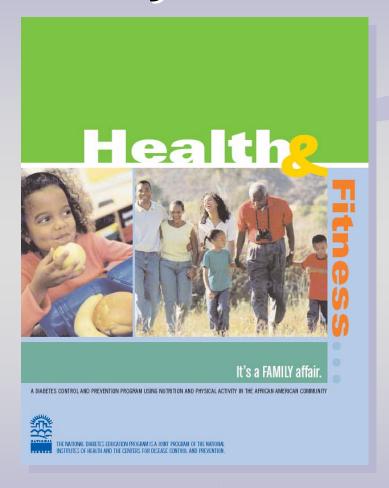






American Indian and Alaska Native

Community Interventions



African American

What does it take to have a successful translation of medical research?

It takes clinical research that:

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- Accounts for those truly at risk
- Is purposely inclusive
- Chooses interventions that have the potential for replication.

The DPP Translation Workgroup

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