HOSPITAL ADMISSIONS FOR UNCONTROLLED DIABETES IMPROVING AMONG AMERICAN INDIANS AND ALASKA NATIVES

Did you know? More than 100 million people living in the United States have diabetes or are at risk for diabetes. American Indians and Alaska Natives (AI/ANs) have the highest rates of Type 2 diabetes in the United States.

If diabetes is not well managed, patients seek help by going to a physician or even the emergency department. Some patients may even be admitted to the hospital.

Some AI/AN patients receive care at Indian Health Service (IHS) hospitals. Using IHS data, the National Healthcare Quality and Disparities Report (NHQDR) team found significant decreases in hospital admissions for uncontrolled diabetes in the AI/AN population receiving treatment at IHS facilities. However, the declines are not as pronounced in younger age groups.

Hospital admissions for uncontrolled diabetes per 100,000 population age 18 and over in Indian Health Service, tribal, and contract hospitals, United States, by sex, 2000-2016

Note: The total for 2016 age-adjusted data is not available because it is statistically unreliable. Lower rates are better.

- From 2000 to 2015, the total rate of hospitalizations for uncontrolled diabetes declined among AI/ANs (from 57.9 per 100,000 population to 9.4).
- During this time, admission rates for AI/ANs declined among both males and females; in 2016, there was no statistically significant difference between males and females in the rate of hospital admissions for uncontrolled diabetes (3.5 per 100,000 population vs. 4.1 per 100,000 population).
Hospital admissions for uncontrolled diabetes per 100,000 population age 18 and over in Indian Health Service, tribal, and contract hospitals, United States, by age, 2000-2016

Note: Contract hospitals do not include Portland, OR, and California regions. The 2015 data point for ages 45-64 is not included, because it is statistically unreliable. Lower rates are better.

◆ From 2000 to 2016, the rate of AI/ANs with hospital admissions for uncontrolled diabetes decreased in those ages 45-64 from 96 per 100,000 population to 4.7 per 100,000 population. The rate for those 65 years and over declined from 88.5 per 100,000 population to 14.6 per 100,000 population.

◆ From 2000 to 2012, the rate for AI/ANs ages 18-44 declined from 23.8 per 100,000 population to 11 per 100,000 population. Data for the remaining years are statistically unreliable.

To access the data, go to Hospital admissions for uncontrolled diabetes without complications per 100,000 population, age 18 and over. These measures are provided by the IHS National Data Warehouse.

Federal programs are working to reduce, if not eliminate, these disparities nationwide, including the following U.S. Department of Health and Human Services programs:

◆ The IHS Division of Diabetes Treatment and Prevention is responsible for developing, documenting, and sustaining clinical and public health efforts to treat and prevent diabetes in AI/ANs. The division works with Area Diabetes Consultants and the IHS Tribal Leaders Diabetes Committee to provide diabetes treatment and prevention services to IHS, tribal, and urban Indian health programs. Go to www.ihs.gov/diabetes.

◆ The HHS Office of Minority Health shared several resources to recognize the invaluable contributions of AI/AN people in the United States. It has also identified multiple projects and resources pertaining to AI/AN communities. Go to www.minorityhealth.hhs.gov/.

◆ The National Library of Medicine has compiled several resources regarding diabetes prevention and management among AI/AN communities. These include powerful patient and provider narratives regarding diabetes from the project “Culture of Diabetes - Native Americans and Futurelessness.” Go to americanindianhealth.nlm.nih.gov/subtopic/1/Health-Conditions/34/Diabetes.
References

