

# Diabetes and Its Awful Toll Quietly Emerge as a Crisis

[The New York Times](#)

As always, the beds at Montefiore Medical Center in the Bronx were filled with a universe of afflictions. In truth, these assorted burdens were all the work of a single illness: [diabetes](#). Room after room, floor after floor, diabetes. On any given day, hospital officials say, nearly half the patients are there for some trouble precipitated by the disease.

An estimated 800,000 adult New Yorkers - more than one in every eight - now have diabetes, and city health officials describe the problem as a bona fide [epidemic](#). Diabetes is the only major disease in the city that is growing, both in the number of new cases and the number of people it kills. And it is growing quickly, even as other scourges like [heart disease](#) and cancers are stable or in decline.

Already, diabetes has swept through families, entire neighborhoods in the Bronx and broad slices of Brooklyn, where it is such a fact of life that people describe it casually, almost comfortably, as "getting the sugar" or having "the sweet blood."

But as alarmed as health officials are about the present, they worry more about what is to come. Within a generation or so, doctors fear, a huge wave of new cases could overwhelm the public health system and engulf growing numbers of the young, creating a city where hospitals are swamped by the disease's handiwork, schools scramble for resources as they accommodate diabetic children, and the work force abounds with the blind and the halt.

The prospect is frightening, but it has gone largely unnoticed outside public health circles. As epidemics go, diabetes has been a quiet one, provoking little of the fear or the prevention efforts inspired by [AIDS](#) or lung [cancer](#).

In its most common form, diabetes, which allows excess sugar to build up in the blood and exact ferocious damage throughout the body, retains an outdated reputation as a relatively benign sickness of the old. Those who get it do not usually suffer any symptoms for years, and many have a hard time believing that they are truly ill.

Yet a close look at its surge in New York offers a disturbing glimpse of where the city, and the rest of the world, may be headed if diabetes remains unchecked.

The percentage of diabetics in the city is nearly a third higher than in the nation. New cases have been cropping up close to twice as fast as cases nationally. And of adults believed to have the illness, health officials' estimate, nearly one-third do not know it.

**One in three children born in the United States five years ago are expected to become diabetic in their lifetimes, according to a projection by the Centers for Disease Control and Prevention.** The forecast is even bleaker for Latinos: one in every two.

New York, perhaps more than any other big city, harbors all the ingredients for a continued epidemic. It has large numbers of the poor and obese, who are at higher risk. It has a growing population of Latinos, who get the disease in disproportionate numbers, and of Asians, who can develop it at much lower weights than people of other races.

It is a city of immigrants, where newcomers eating American diets for the first time are especially vulnerable. It is also yielding to the same forces that have driven diabetes nationally: an aging population, a food supply spiked with sugars and fats, and a culture that promotes overeating and discourages exercise. Diabetes has no cure. It is progressive and often fatal, and while the patient lives, the welter of medical complications it sets off can attack every major organ. As many war veterans lost lower limbs last year to the disease as American soldiers did to combat injuries in the entire Vietnam War. Diabetes is the principal reason adults go blind.

**So-called Type 2 diabetes, the predominant form and the focus of this series, is creeping into children, something almost unheard of two decades ago. The American Diabetes Association says the disease could actually lower the average life expectancy of Americans for the first time in more than a century.**

Even those who do not get diabetes will eventually feel it, experts say - in time spent caring for relatives, in higher taxes and insurance premiums, and in public spending diverted to this single illness.

"Either we fall apart or we stop this," said Dr. Thomas R. Frieden, commissioner of the New York City Department of Health and Mental Hygiene.

Yet he and other public health officials acknowledge that their ability to slow the disease is limited. Type 2 can often be postponed and possibly prevented by eating less and exercising more. But getting millions of people to change their behavior, he said, will require some kind of national crusade. The disease can be controlled through careful monitoring, lifestyle changes and medication that is constantly improving, and plenty of people live with diabetes for years without serious symptoms. But managing it takes enormous effort. Even among Americans who know they have the disease, about two-thirds are not doing enough to treat it.

Nearly 21 million Americans are believed to be diabetic, according to the Centers for Disease Control, and 41 million more are prediabetic; their blood sugar is high, and could reach the diabetic level if they do not alter their living habits.

In this sedentary nation, New York is often seen as an island of thin people who walk everywhere. But as the ranks of American diabetics have swelled by a distressing 80 percent in the last decade, New York has seen an explosion of cases: 140 percent more, according to the city's health department. The proportion of diabetics in its adult population is higher than that of Los Angeles or Chicago, and more than double that of Boston.

There was a pronounced increase in diagnosed cases nationwide in 1997, part of which was undoubtedly due to changes in the definition of diabetes and in the way data was collected, though there has continued to be a marked rise ever since.

Yet for years, public health authorities around the country have all but ignored chronic illnesses like diabetes, focusing instead on communicable diseases, which kill far fewer people. New York, with its ambitious and highly praised public health system, has just three people and a \$950,000 budget to outwit diabetes, a disease soon expected to afflict more than a million people in the city.

[Tuberculosis](#), which infected about 1,000 New Yorkers last year, gets \$27 million and a staff of almost 400.

Diabetes is "the Rodney Dangerfield of diseases," said Dr. James L. Rosenzweig, the director of disease management at the Joslin Diabetes Center in Boston. As fresh cases and their medical complications pile up, the health care system tinkers with new models of dispensing care and then forsakes them, unable to wring out profits. Insurers shun diabetics as too expensive. In Albany, bills aimed at the problem go nowhere.

"I will go out on a limb," said Dr. Frieden, the health commissioner, "and say, 20 years from now people will look back and say: 'What were they thinking? *They're in the middle of an epidemic and kids are watching 20,000 hours of commercials for junk food.*' "

Of course, revolutionary new treatments or a cure could change everything. Otherwise, the price will be steep.

**Nationwide, the disease's cost just for 2002 - from medical bills to disability payments and lost workdays - was conservatively put by the American Diabetes Association at \$132 billion. All cancers, taken together, cost the country an estimated \$171 billion a year.**

"How bad is the diabetes epidemic?" asked Frank Vinicor, associate director for public health practice at the Centers for Disease Control. "There are several ways of telling. One might be how many different occurrences in a 24-hour period of time, between when you wake up in the morning and when you go to sleep. So, 4,100 people diagnosed with diabetes, 230 amputations in people with diabetes, 120 people who enter end-stage kidney disease programs and 55 people who go blind.

"That's going to happen every day, on the weekends and on the Fourth of July," he said. "That's diabetes."  
**One Day in the Trenches**

The rounds began on the seventh floor with Iris Robles. She was 26, young for this, supine in bed. She wore a pink "Chicks Rule" T-shirt; an IV line protruded from her arm. For more than a year, she had had a recurrent skin infection. The pain overwhelmed her. Then came extreme thirst and the loss of 50 pounds in six weeks. In the emergency room, she found out she had diabetes.

She was out of work, wanted to be an R & B singer, had no insurance. It was her fourth day in Montefiore Medical Center. Her grandmother, aunt and two cousins have diabetes.

"I'm scared," she said. "I'm still adjusting to it."