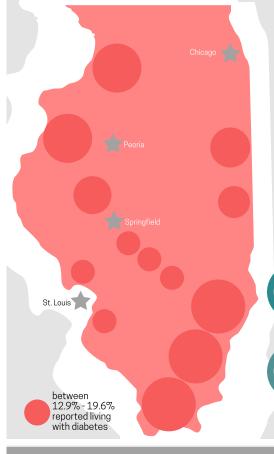
Diabetes Burden Report

State of Illinois 2021

Geographic Differences: Rural vs. Urban Disparities



Rural counties predominately make-up rates higher than the state's average (10.5%) of self-reported diabetes.

These increased rates are attributed to **less diabetes-related health care services** and access to **diabetes self-management education** (DSME) programs than urban populations. Some disparities identified include:

3.8%

less received **foot exam**

2.0% more had a **foot sore** that took more than four weeks to heal

3.3% less received a dilated eye exam

more had diabetic retinopathy

Demographic Differences

Certain demographics have **higher prevalence** of a diabetes diagnosis:



Males



Adults 65 years or older



Hispanic or Latino and non-Hispanic Black populations



Household income less than \$15,000



Less than a high school-level education

Diabetes and COVID-19

Individuals with diabetes who do contract COVID-19 are at a **higher risk** of experiencing **hospitalization** and **death** compared to those without diabetes.

Patients with pre-existing diabetes were



severe/critical COVID-19

3 times

as likely to die in the hospital compared to patients without pre-existing diabetes.

Comorbidities and Health Risks Associated with Diabetes

The majority (97.5%) of patients with diabetes have **at least one** comorbid condition and 88.5% of patients have **at least two** comorbid conditions. Most common include:

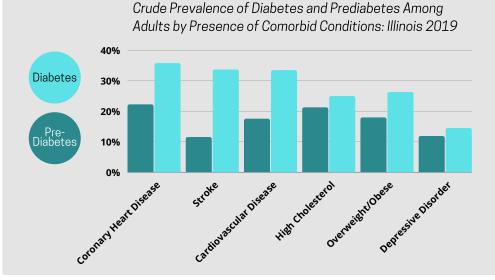
CVD Hypertension

Overweight/obesity

High cholesterol

Chronic kidney disease

The graph below shows the percentage of people who have one of the listed health conditions AND diabetes or pre-diabetes. For example, 33% of people who have had a stroke also have diabetes.



Diabetes Prevention and Management Programs in Illinois

Through the grant, *Improving the Health of Illinoisans through Chronic Disease Prevention*, evidence-based interventions are being implemented with a special focus on populations particularly vulnerable to diabetes, including but not limited to *older adults*, *Hispanic and non-Hispanic Black populations*, and *rural communities*. Focus areas include:

Virtual programs promoting diabetes prevention and selfmanagement. Enhanced training and engagement of licensed pharmacists and community health workers. Medicare Diabetes
Prevention Program (DPP)
expanded model that aims
to prevent the onset of
diabetes among Medicare
beneficiaries.

Target **employerbased coverage** of the National DPP.