**DIABETES PREVENTION AND CONTROL PROGRAM FY 2024 FACT SHEET**

**CDC's Diabetes Program**

The CDC Diabetes Program provides support to all 50 states and Washington, D.C. through cooperative agreements. Under these agreements, states work with local health departments, healthcare providers, and numerous partner organizations across sectors to improve health outcomes for individuals with diabetes or at high risk for type 2 diabetes.Key activities include increasing access to, participation in, and reimbursement for diabetes self-management education and support services for people with diabetes. For people at high risk for type 2 diabetes, activities focus on scaling and sustaining the National Diabetes Prevention Program by increasing awareness of prediabetes and demand for the program among adults at risk; increasing healthcare provider screening, testing, and referral of patients with prediabetes to CDC-recognized diabetes prevention programs; and increasing the number of public and private payers that offer the program as a covered benefit for their members, employees, or beneficiaries with prediabetes. **Additional funding would allow the CDC and states to increase evidence-based prevention activities, targeting areas most at risk.**

**Basic Facts About Diabetes, Impacts, and Costs**

* Diabetes is now the eighth leading cause of death. Overall, the risk for death among people with diabetes is about twice that of people of similar age who do not have diabetes.
* 37.3 million Americans have diabetes. An estimated 96 million adults are estimated to have prediabetes (elevated blood sugar levels), which places them at increased risk of developing type 2 diabetes, heart disease, and stroke. **Of those with prediabetes, more than 80% don’t know they have it.**
* The estimated total diabetes cost in the United States is $327 billion ($237 billion in direct medical costs and $90 billion in indirect costs measured in reduced productivity). People with diagnosed diabetes, on average, have medical expenditures that are twice as high as what expenditures would be in the absence of diabetes.
* Diabetes-related complications have increased among young adults aged 18-44 years and among adults aged 45-64 years.
* Type 2 diabetes, once believed to affect only adults, is being diagnosed in people younger than 20 with increasing frequency. Between 2002 and 2015, rates of new cases of type 2 diabetes in children under 20 rose nearly five percent annually. Incidence of type 1 diabetes in children rose nearly 2% annually.
* Compared to non-Hispanic white adults, American Indian and Alaska Natives are twice as likely to have diabetes, non-Hispanic blacks are 64% more likely, and Hispanics/Latinos are 72% more likely.

**Diabetes is Manageable**

* Studies have found that better blood sugar management reduces the risk for eye disease, kidney disease, and nerve disease by 40% in people with Type 1 or Type 2 diabetes.
* Blood pressure control reduces the risk of heart disease and stroke among people with diabetes by 33-50%.
* Detecting and treating early diabetic kidney disease by lowering blood pressure can reduce the decline in kidney function by 33-37%.
* Improved control of blood cholesterol levels can reduce cardiovascular complications by 20-50%.

**National Diabetes Prevention Program (National DPP)**

In 2010, Congress authorized the CDC to establish and lead the National DPP, an initiative to provide evidence-based, cost-effective interventions in communities to prevent type 2 diabetes. This public-private partnership brings together community-based organizations, health insurers, employers, healthcare systems, academia, and government agencies working to deliver the diabetes prevention lifestyle change program.

Research shows that people with prediabetes who take part in this structured lifestyle change program can cut their risk of developing type 2 diabetes by 58% (71% for people over 60 years old). This is the result of the program helping people lose 5% to 7% of their body weight through healthier eating and engaging in 150 minutes of physical activity a week. For a person who weighs 200 pounds, 5% to 7% of their body weight is equivalent to 10 to 14 pounds. Investing in type 2 diabetes prevention can slow or prevent the development of type 2 diabetes in adults with prediabetes or who are at risk for developing type 2 diabetes—resulting in reduced costs and healthier populations.