Diabetes

Diabetes is a chronic metabolic disease, characterised by high levels of glucose in the blood. It occurs either because the pancreas stops producing the hormone insulin (type 1 diabetes, insulting dependent diabetes, genetic predisposition), which regulates blood sugar, or through a reduced ability to produce insulin (type 2 diabetes, non-insulin dependent in most cases, lifestyle related), or through reduced ability to respond to insulin (insulin resistance). People with diabetes are at a greater risk of developing cardiovascular diseases such as heart attack and stroke. They also have elevated risks for vision loss, foot and leg amputation due to damage to nerves and blood vessels, and renal failure requiring dialysis or transplantation. Globally, an estimated 422 million adults were living with diabetes in 2014, compared to 108 million in 1980. The global prevalence of diabetes has nearly doubled since 1980, rising from 4.7% to 8.5% in the adult population, and caused 1.5 million deaths in 2012, with an additional 2.2 million deaths due to higher-than-optimal blood glucose (WHO, 2016[1]). In LAC, more than 40 million adults (aged 20 and over) live with diabetes and about half of them are undiagnosed and unaware of developing long-term complications.

Amongst LAC countries, the prevalence of diabetes in adults in 2021 ranged from under 5% in Ecuador and Peru to 13% in Guatemala (Figure 3.37). On average, prevalence in LAC countries was 7.9%, an increase from 8.3% in 2010. Guatemala is the country that has experienced the largest increase, 3.8 percentage points, while prevalence in El Salvador has decreased around 3 percentage points in the 2010-21 period.

In the 2010-19 period, mortality attributable to diabetes mellitus in adults increased by 10% or more in countries such as Costa Rica, Venezuela, Dominican Republic, Saint Lucia, Honduras, Suriname, Mexico, and El Salvador. On average, it increased in LAC by 1%, in opposition to the OECD average reduction of 4% (Figure 3.38). Several countries experienced significant decreases of at least -10%, such as Grenada, Colombia, and Peru. In 2019, the country with the highest mortality was Trinidad and Tobago with 100.3 deaths per 100 000 population, followed by Guyana and Saint Vincent and the Grenadines, with 96.9 and 83.6, respectively. Cuba and Costa Rica are the only LAC countries below the OECD average of 12.8 deaths per 100 000 population.

Policy initiatives can be directed towards both reducing diabetes prevalence and mortality. Strengthening the integral response to NCDs, including diabetes, particularly at primary-care level is a key action. In general, countries with strong primary care systems obtain better diabetes results (e.g. Costa Rica, Cuba). For diabetes, this includes the implementation of guidelines and protocols to improve diagnosis and management, ensuring equitable access to essential technologies for all population groups (e.g. insulin). Most of countries in LAC have programmes devoted to diabetes, which is a relevant step toward its control (WHO, 2016[1]). Prevalence must be addressed by targeting risky behaviours (e.g. unhealthy diet and sedentarism are the main ones, as well as alcohol and tobacco consumption).

Definition and comparability

Diabetes prevalence refers to the percentage of people ages 20-79 who have type 1 or type 2 diabetes. Accurate diabetes estimates at the national and global levels rely heavily on the quality and availability of data sources. Data sources were searched and selected according to established criteria, and the standardised, age-specific prevalence of both diabetes and impaired glucose tolerance (IGT) were estimated. For countries where data sources were not available, prevalence was extrapolated based on data sources from similar countries. Mortality rates per 100 000 population were based on data on deaths attributable to diabetes mellitus in adults from IHME Global Burden of Disease (GBD).

References

WHO (2016), *Global report on diabetes*, World Health Organisation, Geneva, <u>https://apps.who.int/iris/handle/10665/204871</u>.

[1]



Figure 3.37. Diabetes amongst adults aged 20-79 years, age-adjusted prevalence, 2010 and 2021

Source: International Diabetes Federation. Diabetes Atlas 2021.

StatLink msp https://stat.link/9nfthi

Figure 3.38. Mortality rates for diabetes mellitus, 2010 and 2019



Source: Global Burden of Disease (2019), IHME.

StatLink ms https://stat.link/gyzx6c



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