

XV Pan American Sanitary Conference

X Meeting Regional Committee



San Juan, Puerto Rico September-October, 1958

> CSP15/33 (Eng.) 22 September 1958 ORIGINAL: SPANISH

Topic 38: STUDY OF THE DIABETES PROBLEM IN AMERICA

(Topic proposed by the Government of Uruguay)

Diabetes is one of the chronic diseases that have increased most in the present century.

The principal causes contributing to this phenomenon are:

- 1. The increase in longevity
- 2. The discovery of insulin
- 3. The improvement of socio-economic conditions, nutrition, and standards of living of populations
- 4. The development of preventive medicine and health education.

The average longevity at present reaches considerably beyond the period of life in which diabetes is most common, that is, between ages 40 and 60.

The success in treating diabetes has notably increased the life span of diabetics.

Diabetes is more frequent in countries having better economic conditions and a greater abundance of foods. It is more common in large cities than in small towns or rural areas.

Two basic factors are responsible for this disease: heredity and obesity.

The recessive character of its transmittal explains why there can be a great many people capable of transmitting diabetes without being diabetics.

The marriage of such carriers of diabetes is the most important cause of the progressive incidence of diabetes. We do not yet know the true rate of incidence, and the figures on mortality are much lower than the actual number of deaths. The reason for this is that in the present system of classification of deaths, diabetes does not generally appear as a determining cause of death, but only as a contributing or accessory cause.

The figures for deaths from diabetes per 100,000 inhabitants in some countries of America, for 1954, are given below:

United States		15.6
Uruguay		12.9
Canada		10.6
Argentina		7.5
Chile		6.4
Brazil	•	5.6
Mexico		4.5
Costa Rica		4.7
Colombia		3.3

It is recognized that in the United States diabetes affects 2 per cent of the population over 20 years of age.

In Uruguay the highest rate is found in Montevideo (1,000,000 in-habitants), which may possibly have the same rate as the United States.

In the rest of the country, with two million inhabitants, the incidence perhaps runs between 0.5 and 1 per cent.

Samplings made in various countries have shown that the number of unknown diabetics equals the number of known cases.

This indicates the necessity of systematically carrying out the control of diabetes in the community.

With early diagnosis and adequate treatment, the progression of diabetes might be contained, thus saving many productive lives, and in many cases regression of the disease might be obtained.

Periodic and systematic urinalysis should be recommended for all adults and particularly for the obese and those who have a family history of diabetes.

It is necessary to acquaint the public with the symptoms of diabetes through cards or posters.

This work has been carried out in Uruguay by the Association of Diabetics, with excellent results.

At present the Mobile Dispensaries of the Honorary Committee for the Anti-tuberculosis Campaign are making a urinalysis in connection with the X-ray of the entire population, and numerous suspected cases of diabetes have been discovered.

The International Diabetes Federation, which has just held its 3rd Congress on Diabetes in Dusseldorf, Germany, has requested the assistance of the World Health Organization in the socio-medical campaign against diabetes.

The governments must participate in the campaign, through their public health organizations, and support the work of the Associations of Diabetics financially and through their Departments of Health Education.

The control of diabetes should be included in preventive-medicine plans, since diabetes is the disease that can be investigated in the community at the least cost.

Because of their simplicity and low cost, reaction paper tests offer and admirable means of promoting diagnosis.

(signed) Alberto Bertolini (Uruguay)