

Diabetes: Changes in lifestyle can prevent illness in early stages developing further

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In Austria approximately 600,000 people, roughly eight percent of the total population, are affected by diabetes. These are the latest figures from the Health Ministry's current 2013 Austrian Diabetes Report, to which the MedUni Vienna diabetologist and gender medicine researcher Alexandra Kautzky-Willer from the University Department of Internal Medicine III also made a significant contribution. On the occasion of the World Diabetes Day on 14 November she points out that there are possibilities of preventing the full onset of the illness whilst it is still in



its early stages.

Whereas <u>diabetes mellitus type</u> 1 is caused by an immunologically-based destruction of islet cells with absolute insulin deficiency, in <u>diabetes mellitus</u> 2 it is insulin resistance and lifestyle habits in particular that play a major role. The main causes of this are stress, smoking, lack of exercise, unhealthy nutrition and, above all, carrying excess weight around the middle and environmental factors. Previous <u>gestational</u> <u>diabetes</u> is regarded as an early form of the disease.

The most dangerous thing about diabetes is that it creeps up on people: many of those affected only learn about it when a serious secondary disease such as a heart attack, stroke, a visual or kidney impairment have occurred.

In the early stages there is however a chance of preventing the disease from becoming the full blown version, and this preliminary stage does after all affect approximately a further nine percent of the population. "In type 2 diabetes this risk can even be reduced by as much as 70 percent by a lifestyle change with a lot of movement (note: training for endurance and strength to improve fitness and muscle development), weight loss and healthier eating," according to Kautzky-Willer. "And, if carried out consistently, these measures are very effective in both sexes."

Lifestyle measures in diabetes that has already fully developed, at least with regard to reducing cardio-vascular disease, no longer appear as effective. Diabetes is, above all in women, very strongly linked with a raised risk of depression as well.

Screening from 45 – gender-specific treatment

This is why, on the occasion of World Diabetes Day 2013, this expert advises prompt attendance at screening. This applies above all to the risk



groups, that is, people from 45 years onwards, who are overweight, carrying excess weight concentrated around the midriff (from 88 cm and upwards for women, 102 cm for men), with a genetic predisposition, high blood pressure, low HDL cholesterol, but also with heart failure or fatty liver disease. Women with gestational diabetes are also a high risk group and have to receive regular check-ups once they have given birth even when they get back to normal glucose tolerance. And those who already have vascular damage should definitely have diabetes ruled out as a cause.

The professor for gender medicine at the MedUni Vienna insists on a gender-specific approach in the treatment of diabetes: "Gender influences not only individual health-related behaviour but also the development and course of a person's diabetes. Consideration must be given to these factors." Low social status or stress is linked to a higher risk of diabetes in women, whilst men, for example, demonstrate a lower sensitivity to insulin, more unhealthy belly fat and an unhealthier nutritional pattern.

Provided by Medical University of Vienna

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