

# Interventions to delay and prevent type 2 diabetes are underused, researchers say

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Lifestyle interventions, medication and surgery for patients diagnosed with pre-diabetes is proven to delay or prevent Type 2 diabetes in the majority of patients, but limited access to the often expensive treatments is fueling rising rates of the disease, according to research in *The Journal of the American Osteopathic Association*.

Currently, one in three American adults has prediabetes and more than 70% of adults are overweight or obese. Evidence shows [lifestyle interventions](#), medication or surgery that results in [weight loss](#) effectively prevents or delays the onset of Type 2 diabetes for as many as 70% of patients with prediabetes, said researcher Jay Shubrook, DO, who specializes in the treatment of diabetes.

"We know that it's much more cost effective to prevent disease than to treat it, particularly when it comes to diabetes. The short-term focus on immediate costs means patients are missing out on the opportunity to keep their disease from progressing. It's a false economy and if nothing changes, a third of Americans are expected to have diabetes by 2050," Dr. Shubrook explained.

## Evidence-based interventions

Common [lifestyle](#) interventions focus on nutrition and increasing physical activity to promote weight loss. Most prioritize offering a supportive group environment to help participants achieve their goals,

typically a mean weight loss of 7%. In a 3,200 participant study, lifestyle [intervention](#) reduced the incidence of type 2 diabetes by 58% in patients with prediabetes. A 10-year follow up reported a 34% decrease in the incidence of diabetes for the original study participants. The results and projected cost savings were so impressive that the Diabetes Prevention Program is now a mandated benefit for people with prediabetes who have Medicare.

The prescription medication metformin and other drug interventions were somewhat less effective than lifestyle changes, but also resulted in preventing or delaying the onset of diabetes. Metabolic, or weight-loss, surgery was more effective than lifestyle interventions at preventing diabetes onset and had longer lasting benefits, with a relative risk reduction of 78%.

"Weight loss is a central treatment target for most chronic diseases because the benefit is spread across numerous conditions," Dr. Shubrook noted. "We have the tools to change the trajectory for millions of [patients](#) at risk for [diabetes](#). Using them wisely will save not only money, but lives, in the long run."

**More information:** *Journal of the American Osteopathic Association*, [DOI: 10.7556/jaoa.2018.158](https://doi.org/10.7556/jaoa.2018.158)

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