Tips for controlling your diabetes:

Eat smart

- Control your portion sizes.
- Limit fat intake, especially saturated and trans fats (including candy, cakes, fatty meat cuts, fried or processed foods, whole milk or cream, and butter)
- Limit consumption of sugary foods such as soda, artificially flavored juices, sweetened tea and coffee
- Limit consumption of salt, commonly found in canned and packaged soups, pickles, and processed meats.
- Get plenty of whole-grain foods.
- Eat plenty of fruits and vegetables, and 100% pure juices.

Exercise regularly

- Regular exercise helps to control weight, blood glucose, cholesterol, blood pressure, as well as keeping the heart and nerves healthy (a key concern for diabetics).
- It is recommended that people with diabetes engage in moderate intensity exercise for at least 30 minutes a day and at least 5 days a week.
- Do some physical activity every day, rather than a lot one day and none the next.
- Discuss your exercise plan and unique health needs with a healthcare provider. If you have problems with your eyes, feet, or blood pressure, he or she may recommend that you limit your physical activity to certain specific types.

Take responsibility for your health

- Monitor your blood alucose levels
- Take the medications and/or insulin prescription recommended by your healthcare provider.
- Touch base regularly with your endocrinologist, ophthalmologist, and podiatrist, as well as your primary care physician.

Source: Centers for Disease Control, "Be Active", found at http://www.cdc.gov/diabetes/consumer/prevent.htm, accessed on December 15, 2013

Centers for Disease Control, "Eat Right", found at http://www.cdc.gov/diabetes/consumer/prevent.htm, accessed on December 15, 2013

What is prediabetes?

- Prediabetes is a condition of elevated blood glucose level that has not yet reached a diabetic level.
- It, along with insulin resistance, had no symptoms. An individual may be prediabetic for years without knowing it.
- Prediabetes increases your risk of developing Type 2 diabetes and heart disease.
- Weight loss and exercise may halt the onset of diabetes from prediabetes by returning blood glucose levels to a normal range.

Source: Centers for Disease Control, "Prevent Diabetes", found at http://www.cdc.gov/diabetes/consumer/prevent.htm, accessed on December 15, 2013

The Saudi Arabian Ministry of Health (MOH) utilizes a public health approach to address the burden of diabetes in the kingdom. MOH provides free diagnoses and treatment for those with diabetes. The MOH has developed and implemented programs to improve diet and increase physical activity in order to prevent and control diabetes and other chronic diseases. The scope of the Ministry's activities includes leadership, policy and guidelines development, surveillance, epidemiological and behavioral research, intervention development, technical assistance to regions and communities. training and education, communication, and partnership development.



Kingdom of Saudi Arabia
Ministry of Health
Deputy Minster for Public Health
Assistant Deputy Minister for Primary
Health Care
General Directorate for Prevention of
Genetic & Chronic diseases

Diabetes at-a-glance

9 / 3 / 2014

Saudi Health Information Survey for Non- Communicable Diseases in Kingdom of Saudi Arabia 2013

www.moh.gov.sa http://facebook.com/saudiMOH http://twitter.com/saudiMOH

الهاتف المجانى: 8002494444

Diabetes at-a-glance

The Saudi Burden of Disease 2010 study showed that high fasting plasma glucose was the 3rd ranked risk factor for disability-adjusted life years (DALYs) in the Kingdom of Saudi Arabia (KSA). High blood glucose accounted for 10.0% and 7.9% of DALYs for males and females, respectively. Diabetes is strongly associated with higher risks of chronic diseases including atherosclerosis and coronary artery disease.

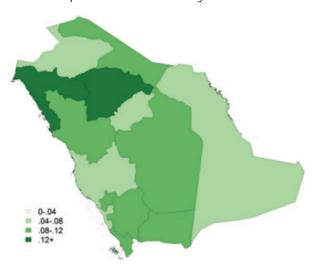
Common symptoms of diabetes:

- Frequent urination
- Extreme hunger or thirst
- Weight loss
- Problems with vision
- Tingling or numbness of the extremities.
- Unexplained fatigue
- Dry skin
- Cuts or sores that heal slowly
- High number of infections

Diabetic individuals have elevated glucose levels in their blood. When food is consumed, much of it is converted by the body into glucose, or sugar, which the body in turn uses to fuel our everyday activities and functionalities. Insulin is a hormone produced in the pancreas that supports the transport of glucose into the cells of the body. Diabetic individuals have a decreased capacity to produce insulin, which causes glucose to accumulate in the blood. Diabetes can cause serious health complications including blindness, kidney failure, and lower-extremity amputations.

Source: Centers for Disease Control, "Basics about Diabetes", found at http://www.cdc.gov/diabetes/consumer/learn.htm, accessed on December 15, 2013

Proportion Saudis who have high cholesterol



Complications of diabetes include:

Cardiovascular disease

Diabetic individuals are at increased risk for coronary artery disease, atherosclerosis, angina, heart attacks, and strokes.

Nerve damage

High blood sugar can damage the capillaries that supply nerves, often in the legs and feet, causing a loss of sensation.

Kidney damage

The body's kidneys are responsible for filtering waste from the blood. Diabetes can inhibit this process and possibly lead to kidney failure.

• Eye damage

Diabetes can impact the blood vessels that supply the retina, possibly leading to blindness.

Alzheimer's disease

Evidence suggests that Type 2 diabetes causes increased risk for Alzheimer's disease.

Cancer

Evidence suggests that Type 2 diabetes causes increased risk for some cancers.

Source: Centers for Disease Control, "Complications", found at http://www.mayoclinic.com/health/diabetes/DS01121, accessed on December 15, 2013

Risk factors for diabetes include:

Overweight or obese

Being overweight or obese substantially increases the risk of developing diabetes, by inhibiting the body's ability to produce insulin and raising blood glucose. If you are obese, even slight weight loss can help lower your chance of being diagnosed with diabetes.

Having a diabetic relative

There is a genetic component to diabetes, making it more likely that an individual with a close family member who is diabetic will develop diabetes him or herself.

High blood pressure

A blood pressure of 140/90 or worse substantially increases the risk of developing diabetes.

Non normal cholesterol

Having an HDL of 35 or lower or Triglyceride level of 250 or higher.

Physical inactivity

It is recommended that you exercise at least three times a week to lower your risk of developing diabetes.

History of gestational diabetes

Having previously developed gestational diabetes or given birth to a child of over 4.0 kg increases ones risk of developing diabetes.

Source: Centers for Disease Control, "Prevent Diabetes", found at http://www.cdc.gov/diabetes/consumer/prevent.htm, accessed on December 15, 2013

Saudi Health Information Survey:

Recent data from the Saudi Health Interview Survey (SHIS) show high rates of diabetes in the Kingdom. An individual are considered diabetic if their blood HbA1c level was 6.5% or more, or if they have been diagnosed and currently treated for diabetes but their blood HbA1c level was less than 6.5%. This large household survey showed that the total prevalence of diabetes was 14.8% for males and 11.7% for females in 2013. The prevalence of diabetes increased with age and ranged from 4.7% among those aged 15-24 years to 50.4% among those aged 65 years and older. The prevalence of diabetes varied by region, with the highest prevalence occurring in Ha'il and the lowest prevalence occurring in Jazan.

The prevalence of pre-diabetics was very high in Saudi. Borderline diabetes was present in 17% of males and 15.5% of females. Moreover, 40.2% of men and 48.4% of women had diabetes and were not aware of it.

The results from the SHIS indicate that diabetes is associated with obesity and hypertension. Diabetes prevalence was 19.9% among those who were obese compared to 10.7% among those who were not obese. Diabetes prevalence was 33.4% among those who were hypertensive compared to 9.6% among those who were not hypertensive.