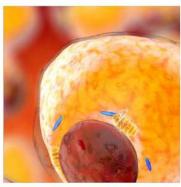
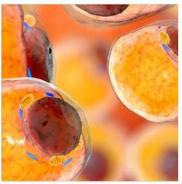
## The 2019 LATAM Diabetes management workshop

Satellite symposium during the ALAD congress



Friday, 1 November 2019 from 17.00 to 18.30

Punta Cana, Dominican Republic









#### **Guillermo E. Umpierrez**

Emory University
Section Head, Diabetes & Endocrinology
Grady Health System
Atlanta (GA), USA

#### **DISCLOSURE**

Declared no potential conflict of interests



# Eat well and move yourself! Obesity management for diabetes prevention

**Guillermo E. Umpierrez** 



## Learning objectives

- Understand the link between changes in habits and obesity/insulin resistance
- Benefits of a healthy lifestyle
- Evaluate different lifestyle intervention strategies for diabetes prevention



#### **Diabetes Prevention**

Lifestyle Intervention Pharmacological Intervention

Metabolic Surgery



## Interventions to Reduce Risks Associated With Prediabetes

- Therapeutic lifestyle management is the cornerstone of all prevention efforts
- No pharmacologic agents are currently approved for the management of prediabetes in the US
  - Pharmacotherapy targeted at glucose may be considered in high-risk patients after individual risk-benefit analysis



## SCIENTIFIC Lifestyle Intervention in Prediabetes

- Persons with prediabetes should reduce weight by 5% to 10%, with long-term maintenance at this level
  - A program of regular moderate-intensity physical activity for 30-60 minutes daily, at least 5 days a week, is recommended
  - A diet that includes caloric restriction, increased fiber intake, and (in some cases) carbohydrate intake limitations is advised

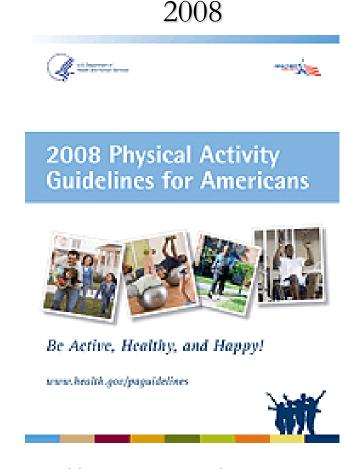


- Medical nutrition therapy (MNT) provided by registered dietitian nutritionists (RDNs).
- For weight loss, the RDN should schedule at least 14 MNT encounters (either individual or group) over a period of at least 6 months
- To maintain weight loss, the nutrition practice guideline recommends "at least monthly MNT encounters over a period of at least 1 year



## Lifestyle Modification: Physical Activity Guidelines and Recommendations

- Physical activity (not "exercise")
- Some is better than none
- ≥150 min/wk of moderate intensity activity
- Both aerobic (endurance) and strengthening (resistance) activity are beneficial



http://www.health.gov/gaguidelines

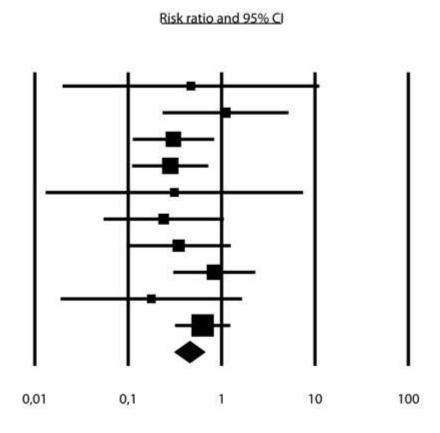


## Effects of lifestyle changes on adults with prediabetes: A systematic review and meta-analysis

Type 2 diabetes after one year

Study name	Statistics for each study			Typ 2 Diabetes / Total	
	Risk ratio	Lower limit	Upper limit	Lifestyle intervention	Control
Brazilian LIS, 2010	0,47	0,02	11,00	0/21	1/30
EDIPS, 2009	1,10	0,24	5,15	3/39	3/43
Finnish DPS, 1999-20080,31		0,11	0,82	5 / 256	16 / 250
Lindahl et al., 2009	0,28	0,11	0,71	5/70	20 / 79
O'Brien et al., 2017	0,31	0,01	7,35	0/30	1/28
SLIM Study, 2006-2011	0,24	0,06	1,04	2/50	10 / 60
Wong et al., 2013	0,35	0,10	1,24	3 / 54	8 / 50
Xu et al., 2013	0,84	0,31	2,27	6/41	7 / 40
Yates et al., 2009	0,18	0,02	1,64	1 / 64	3 / 34
Zensharen Study, 2011	0,63	0,32	1,22	13 / 311	22 / 330
	0,46	0,32	0,66		

Data from 22 RCTs involving 9796 people with prediabetes compared lifestyle intervention with treatment as usual.



Favors lifestyle intervention Favor

Favors control



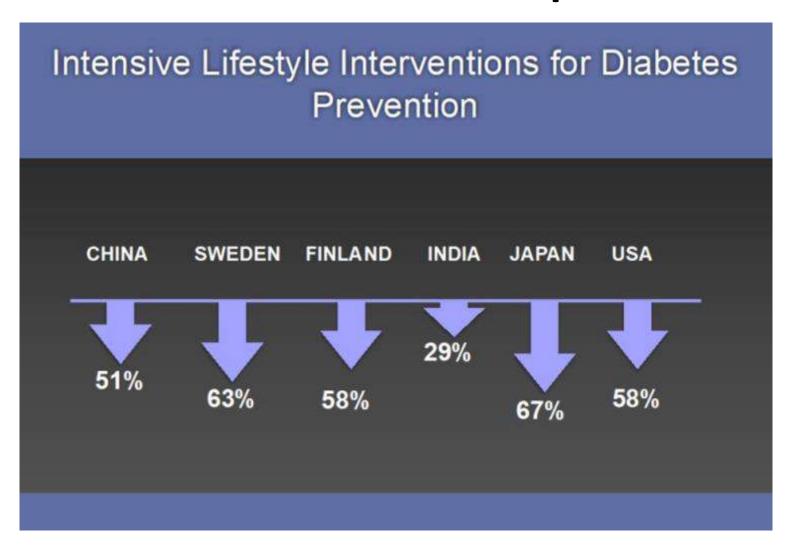
## Effects of lifestyle changes on adults with prediabetes: A systematic review and meta-analysis

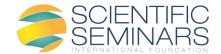
Type 2 diabetes after three years

Type 2 diabetes / Total Study name Statistics for each study Risk ratio and 95% CI Lifestyle intervention is effective in preventing or delaying progression to type 2 diabetes. After one and three years of lifestyle intervention, there is a 36% - 54% lower risk of progressing to type 2 diabetes compared to treatment as usual After one year: 4% vs.10%; RR 0.46 [95% CI0.32,0.66]; After three years: 14% vs.23%, RR 0.64 [95% CI 0.53,0.77]



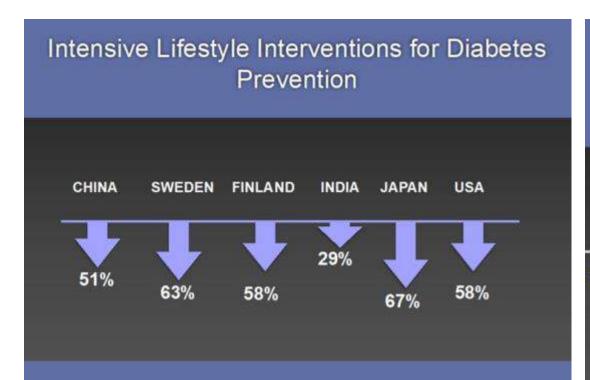
## Major trials using intensive lifestyle interventions for diabetes prevention



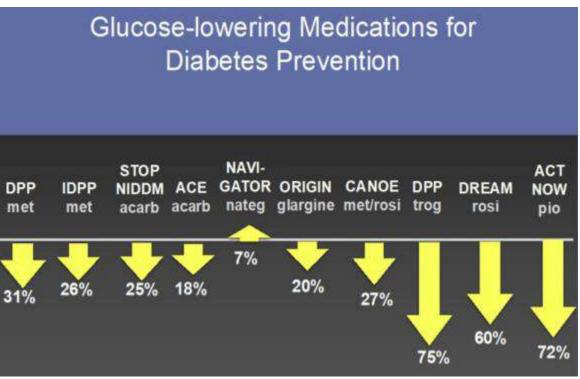


### **Prediabetes: Randomized Controlled Trials**

#### Intensive lifestyle interventions



#### Glucose-lowering medications

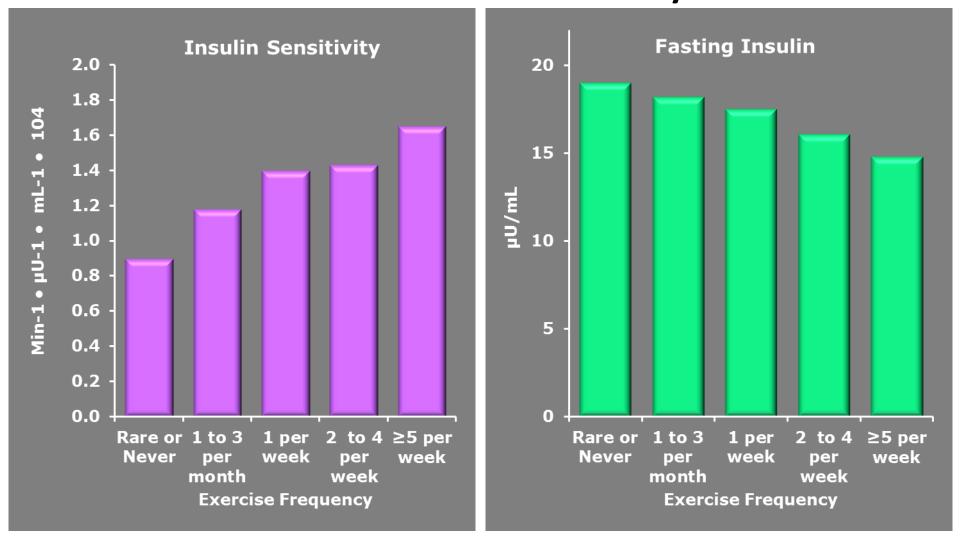


Lifestyle interventions have utilized a low fat (<30% calories from fat; <10% from saturated fat) hypocaloric diet and moderate intensity exercise ~150 minutes per week for the purpose of 5-7% weight reduction.

Endotext. Prediabetes. www.endotext.org



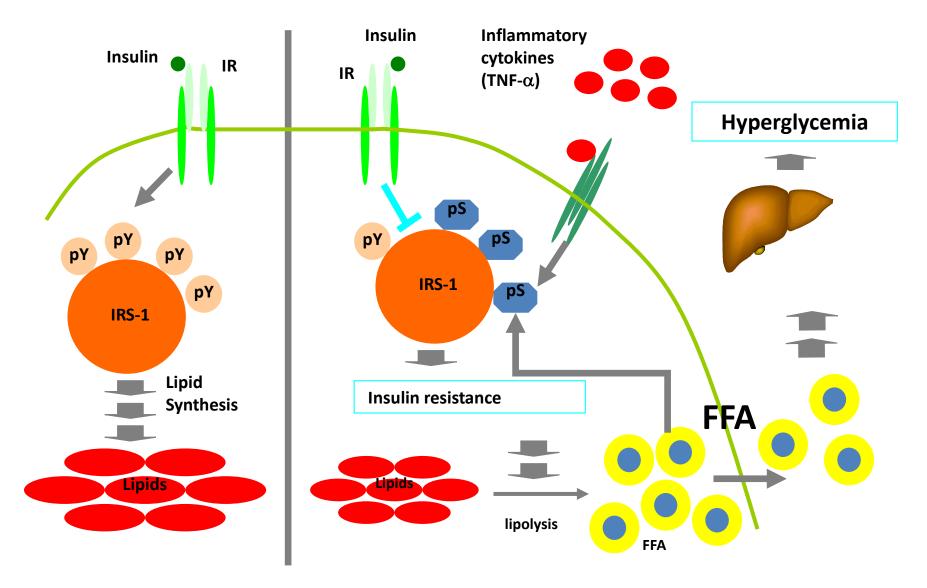
## Association Between Insulin Sensitivity and Physical Exercise: The IRAS Study



**IRAS=Insulin Resistance Atherosclerosis Study** 



### Inflammation-Induced Hyperglycemia



Gustafson B, et al. Arterioscler Thromb Vasc Biol. 2007;27(11):2276-2283.



### **Diabetes Prevention Program**

- Enrolled 3,234 subjects-IGT plus elevated FPG
  - ◆ 1043 men, 2191 women
  - ◆ Mean age 51 yr
  - ◆ Mean BMI 34 Kg/m<sup>2</sup>

#### Intervention:

- ◆ Intensive lifestyle intervention 7% wt. loss, 3h/wk exercise
- ◆ Standard lifestyle recommendations plus metformin
- ◆ Standard lifestyle recommendations plus placebo

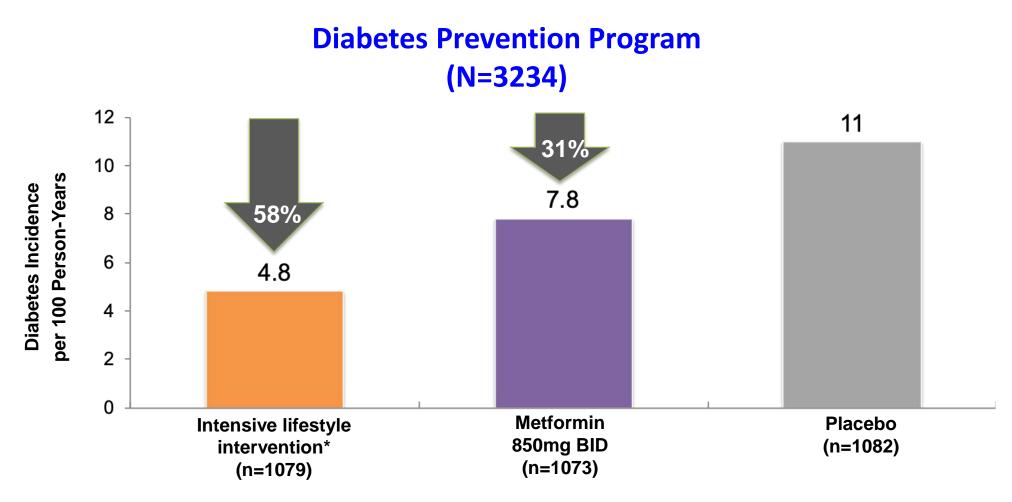
#### Study groups:

- ◆ Fasting glucose between 95 125 mg/dL
- ◆ IGT based on a 75 g OGTT (2 h glucose 140 199 mg/dl)

Knowler, W. C., et al. (2002). NEJM 346(6): 393-403.



## SCIENTIFIC SEMINARS - To the state of the s **Progression From IGT to T2D**



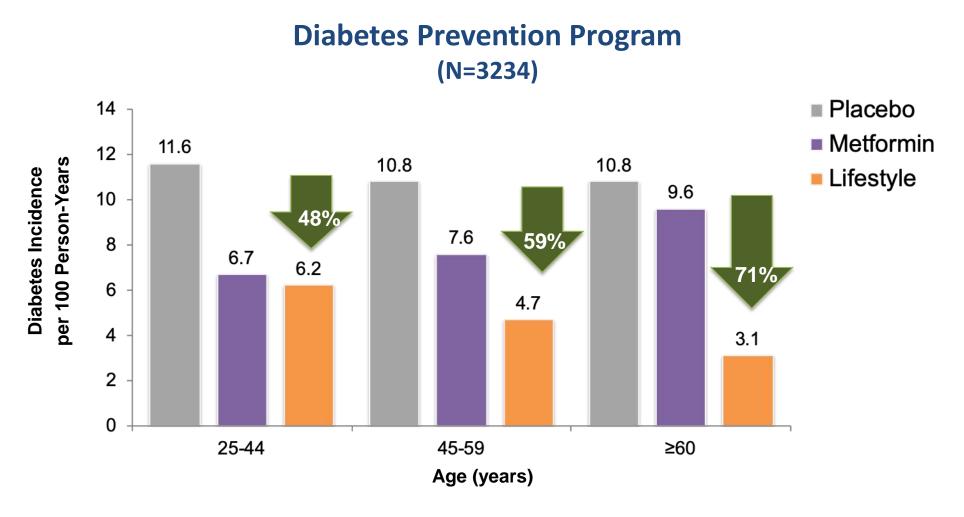
<sup>\*</sup>Goal: 7% reduction in baseline body weight through low-calorie, low-fat diet and ≥150 min/week moderate intensity exercise.

IGT, impaired glucose tolerance; T2D, type 2 diabetes.

DPP Research Group. N Engl J Med. 2002;346:393-403.



## Lifestyle Intervention More Effectively Prevents Diabetes as Populations Age (>60 years)



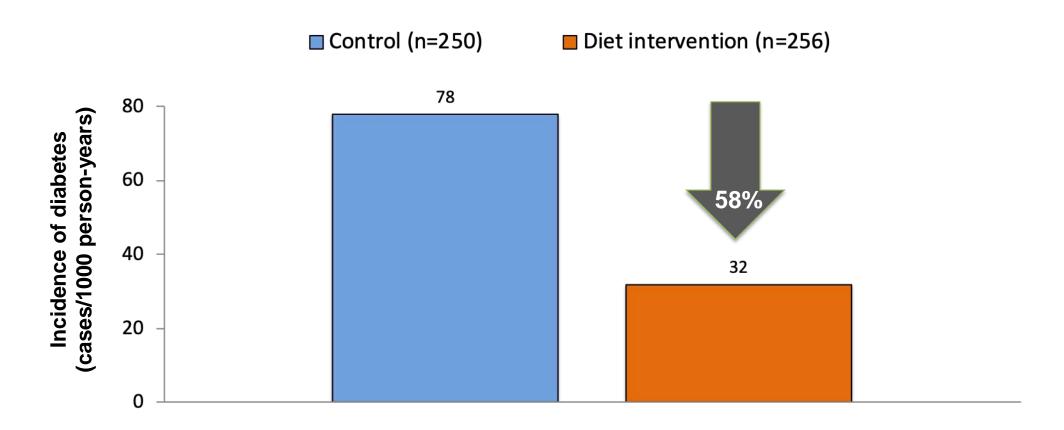
\*Goal: 7% reduction in baseline body weight through low-calorie, low-fat diet and ≥150 min/week moderate intensity exercise .

DPP Research Group. *N Engl J Med*. 2002;346:393-403.



#### **Cumulative Incidence of Diabetes Over 4 Years**

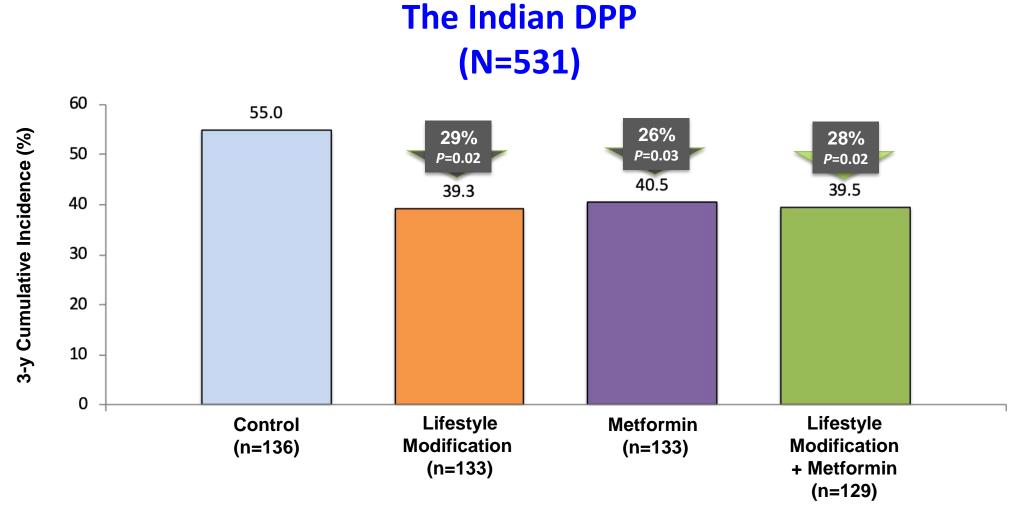
#### **The Finnish Diabetes Prevention Study**



DBP, diastolic blood pressure; SBP, systolic blood pressure. Tuomilehto J, et al. *N Engl J Med*. 2001;344:1343-1350.



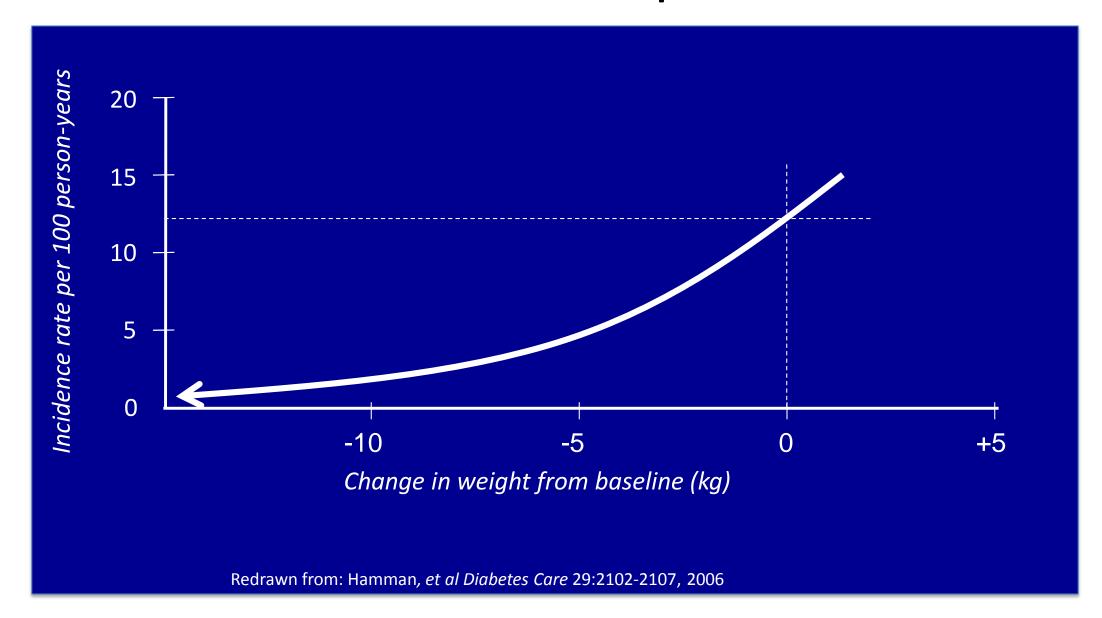
## **Effect of Lifestyle Modification and Metformin on Cumulative Diabetes Incidence**



DPP, Diabetes Prevention Program; LSM, lifestyle modification; MET, metformin; RRR, relative risk reduction. Ramachandran A, et al. Diabetologia. 2006;49:289-297.



## The DPP experience





### **National Diabetes Prevention Program**



CDC-approved DPP curriculum



12 month Core Benefit



Maintenance Sessions

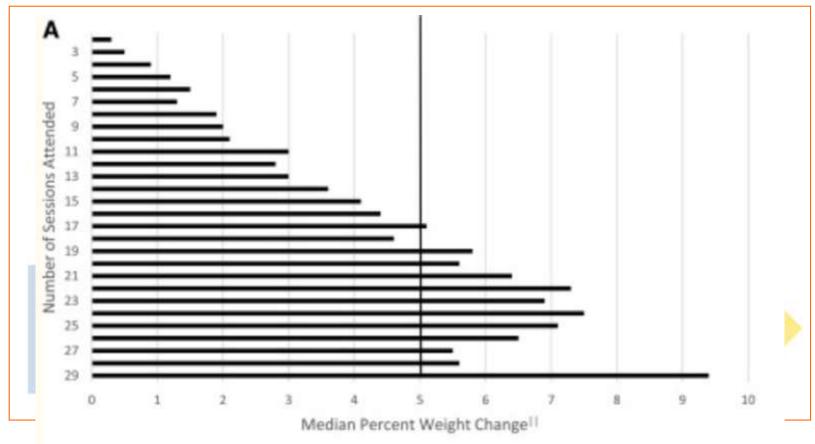
- Minimum of 16 core sessions
- First 6 months

- Monthly maintenance sessions
- Second 6 months

AFTER 1st YEAR: monthly maintenance sessions IF patient achieves & maintains minimum weight loss



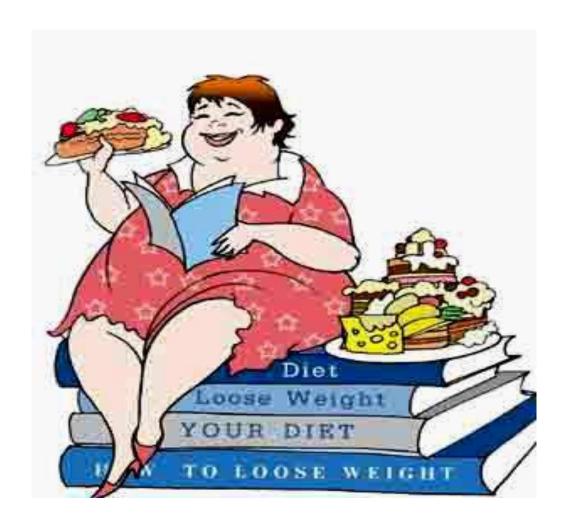
## SCIENTIFIC National Diabetes Prevention Program



Data from 14,747 adults enrolled 2/2012-2016:

35.5% achieved the 5% weight loss (average weight loss 4.2%; median weight loss 3.1%) 152 min of physical activity with 41.8% meeting the physical activity goal of 150 min per week.





We all know what to eat and not to eat but we still don't lose weight!



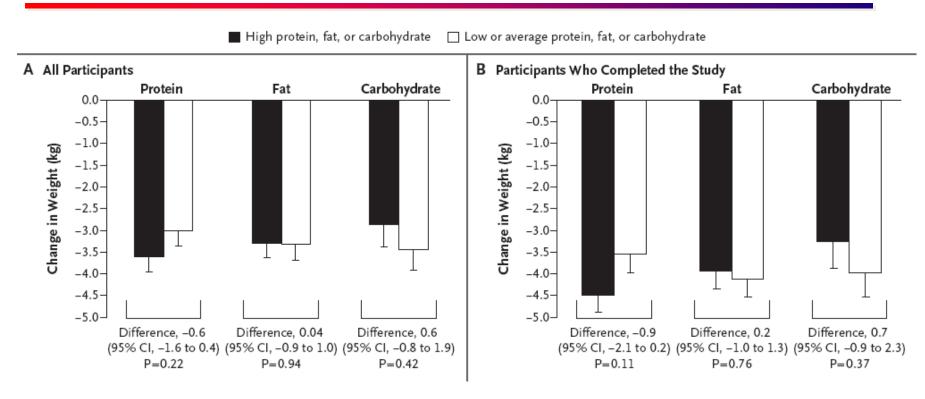
## The NEW ENGLAND JOURNAL of MEDICINE

ESTABLISHED IN 1812

FEBRUARY 26, 2009

VOL. 360 NO. 9

### Comparison of Weight-Loss Diets with Different Compositions of Fat, Protein, and Carbohydrates



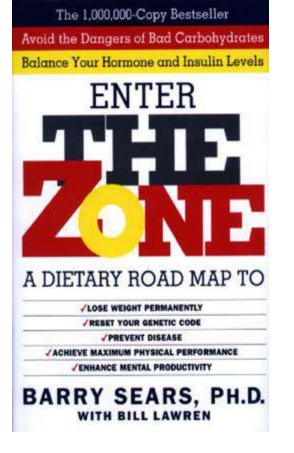
#### **Conclusions**

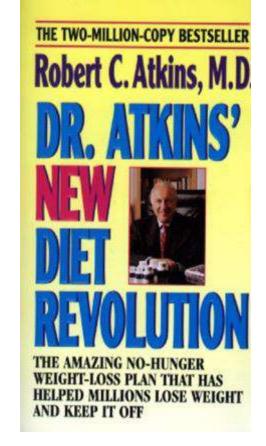
Reduced-calorie diets result in clinically meaningful weight loss regardless of which macronutrients they emphasize.

n engl j med 360; Feb 26, 2009









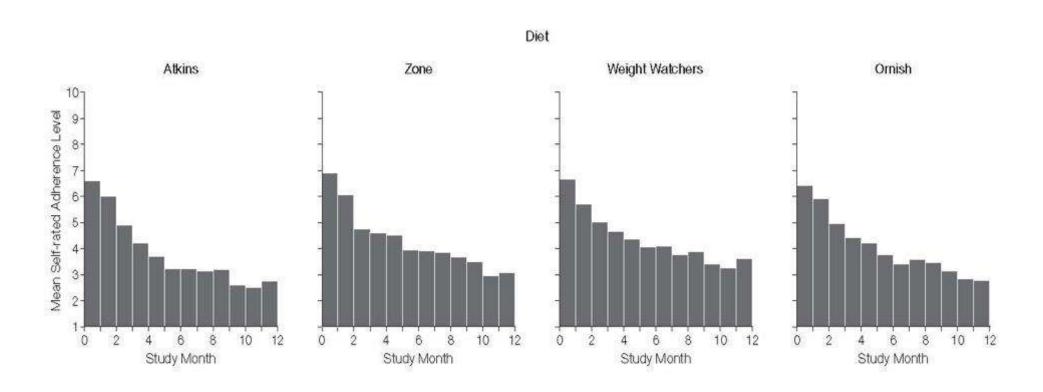
- 56% Carbs
- 20% Protein
- 24% Fat

- 40% Carbs
- 30% Protein
- 34% Fat

- 20% Carbs
- 30% Protein
- 60% Fat



### Adherence to Any Diet Is Difficult

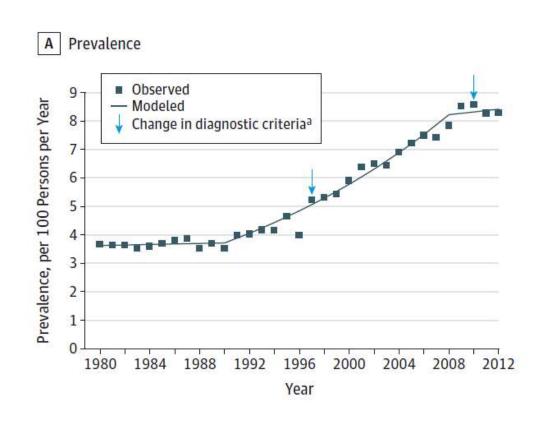


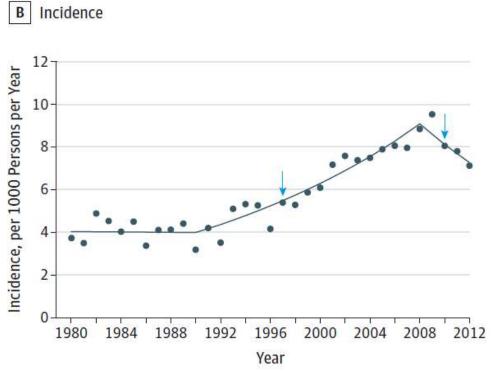
-40-50% of participants did not complete the study Re: Difficult to follow dietary modifications



### SCIENTIFIC Prevalence and Incidence Trends for Diagnosed Diabetes Among Adults Aged 20 to 79 Years, United States, 1980-2012

Linda S. Geiss, MA; Jing Wang, MPH; Yiling J. Cheng, MD, PhD; Theodore J. Thompson, MS; Lawrence Barker, PhD; Yanfeng Li, MD; Ann L. Albright, PhD, RD; Edward W. Gregg, PhD







### Prevalence and Incidence Trends for Diagnosed Diabetes SCIENTIFIC Among Adults Aged 20 to 79 Years, United States, 1980-2012

Linda S. Geiss, MA; Jing Wang, MPH; Yiling J. Cheng, MD, PhD; Theodore J. Thompson, MS; Lawrence Barker, PhD; Yanfeng Li, MD; Ann L. Albright, PhD, RD; Edward W. Gregg, PhD

New cases of diagnosed diabetes in the U.S. decreased by 35 percent since a peak in 2009 – the first sign that efforts to stop the nation's diabetes epidemic are working, CDC researchers report. New cases have declined from 1.7 million new cases per year in 2008 to 1.3 million new cases in 2017. May 28, 2019

Centers for Disease Control and Prevention (.gov) > media > releases > p...

After 20-year increase, New Diabetes Cases Decline | CDC ...

Diabetes prevalence in the US leveling off?



### **Conclusions**

- Therapeutic lifestyle management is the cornerstone of all prevention efforts
- Intensive lifestyle results in improvement in glycemic control, weight loss and increased activity level
- Intensive lifestyle intervention reduced the development of diabetes by 40-60%



## Thank you!