

October 20, 2006

## **DIABETES: TYPES AND TREATMENT**

Diabetes is a chronic illness that affects more than 800,000 people, or 8.73 per cent of Ontario's population. About one in 20 Canadians will develop diabetes. More than 60,000 new cases are diagnosed annually, including 20,000 in Ontario.

The exact causes of diabetes are unknown. In most cases, both hereditary and lifestyle factors are involved.

There are two main types of diabetes: Type 1 and Type 2. A third type, gestational diabetes, is a temporary condition that occurs during pregnancy.

Type 1 Diabetes occurs when the pancreas is unable to produce insulin. It is usually diagnosed in children and adolescents. Approximately 10 per cent of people with diabetes have type 1 diabetes.

Type 2 Diabetes occurs when the pancreas does not produce enough insulin or when the body does not effectively use the insulin that is produced. It usually develops in adulthood, though children can develop type 2 diabetes as well. Type 2 diabetes accounts for most of the remaining 90 per cent of people with the illness.

### **Conditions from Diabetes**

If left untreated or improperly managed, diabetes can result in a variety of complications, including:

- Heart disease
- Kidney disease
- Eye disease
- Problems with erection (impotence)
- Nerve damage

### **Diabetes Coverage in Ontario**

Diabetes is a serious chronic disease that is costly to both the affected individual and to society and requires the daily commitment of the individual with diabetes to self-manage through a balance of lifestyle and medication.

Because of the complex nature of the disease, diabetes management requires regular access to health care services to prevent long-term complications.

The \$35 million Ontario Diabetes Strategy is focused on diabetes education, early intervention and effective prevention of complications.

Ontario's diabetes strategy includes the following initiatives:

*The Pediatric Diabetes Initiative (PDI)* for children with type 1 diabetes was established to make appropriate education, treatment and follow-up resources available to children with diabetes and their parents by 34 programs across Ontario

*The Diabetes Complications Prevention Strategy (DCPS)* was created to provide basic-level diabetes education programs in southern Ontario.

*The Southern Ontario Aboriginal Diabetes Initiative (SOADI)* was developed and continues to be directed by representatives of all major Aboriginal organizations in southern Ontario.

*The Northern Diabetes Health Network (NDHN)* was established to address the high rate of the disease and lack of services for it in Northern Ontario. The network funds 34 diabetes education programs in large and small northern communities.

## **Diabetes Education**

Educating patients is essential in the treatment of diabetes, and people with diabetes are encouraged to take an active role in the day-to-day management of their own health care. Self-care, however, requires that patients have certain skills. These can be learned at one of Ontario's more than 50 Diabetes Education Centres, many of which are located in hospitals.

At each centre, a team of educators is available to teach diabetes patients skills that help them care for themselves. This team has a physician, a nurse and a dietitian. It may also have a social worker, clinical psychologist, chiropodist, pharmacist and/or physiotherapist.

As well as promoting self-care, the team develops a special management plan for each patient with the aim of relieving diabetes symptoms, preventing or treating complications, and improving the quality of life.

On November 20, 2005 the McGuinty government announced the creation of 69 new diabetes education and care teams across Ontario that will be run through the Diabetes Complications Prevention Strategy, the Northern Diabetes Health Network and the Pediatric Diabetes Initiative.

## **Assistive Devices Program**

In addition to the supports provided as part of the Ontario Diabetes Strategy, the government of Ontario provides funding for diabetes equipment and supplies for individuals requiring insulin under the Assistive Devices Program (ADP), to give people increased independence and control over their lives.

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