



HR1276

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HOUSE RESOLUTION

2 WHEREAS, November is American Diabetes Month, and
3 approximately 1,325,000 people in Illinois, or 12.5% of the
4 adult population, have diabetes; residents of Asian American
5 heritage comprise 7.8% of the population of the State of
6 Illinois; and

7 WHEREAS, Diabetes is the fifth leading cause of death among
8 Asian Americans; and

9 WHEREAS, Asian Americans are over 30% more likely to have
10 diabetes than white Americans; and

11 WHEREAS, Asian Americans are also at greater risk of
12 developing prediabetes, diabetes, and associated risks, such
13 as cardiovascular disease, at a lower body mass index (BMI)
14 than whites, Hispanics, African Americans, or Native
15 Americans; and

16 WHEREAS, Asian Americans face a healthcare disparity in
17 type 2 diabetes detection and diagnosis; this is due in part to
18 general guidelines calling for screening at a body mass index
19 of 25kg/m²; this current guideline misses 36% of diabetes
20 diagnoses in Asian Americans over the age of 45 in Illinois,
21 approximately 16,030 individuals; this also underestimates the

1 prevalence of prediabetes among Asian Americans and the
2 increased risk of both among younger Asian Americans; and

3 WHEREAS, Two out of three persons with type 2 diabetes die
4 from heart attack or stroke, and adults with diabetes are at
5 risk for developing end stage renal disease and kidney failure,
6 blindness, and lower limb loss; and

7 WHEREAS, The per capita health care cost of direct medical
8 expenses for diagnosed and undiagnosed diabetes, prediabetes,
9 and gestational diabetes, along with associated indirect costs
10 and productivity loss in Illinois, is an estimated \$8,981 per
11 year; in 2017, the annual cost for diabetes in Illinois was
12 estimated at \$8.7 billion in medical costs plus \$3.2 billion in
13 productivity loss; and

14 WHEREAS, Early detection and treatment can mitigate
15 diabetes-related complications, risks, and costs; and

16 WHEREAS, Interventions focusing on nutrition, physical
17 activity, and healthy weight loss have been shown to reverse
18 prediabetes, improve glucose function in diabetics, and reduce
19 the need for multiple medications; and

20 WHEREAS, Screening Asian American patients aged 45 and
21 older at a body mass index of 23kg/m2 instead of 25kg/m2 would

1 unmask over 9,222 diabetes cases and many thousands more
2 prediabetes cases and would lead to increased screenings among
3 younger Asian Americans at risk for diabetes at BMI 23, thereby
4 initiating treatment or early interventions to reduce negative
5 co-morbidities like heart diseases, kidney diseases, and limb
6 amputation; and

7 WHEREAS, The National Institutes of Health found that more
8 than half of Asian Americans with diabetes are undiagnosed,
9 greatly increasing their overall health risk; and

10 WHEREAS, According to community-based participatory
11 research and studies on Asian American subpopulations, Asian
12 Americans also have increased risk for diabetes and
13 prediabetes; and

14 WHEREAS, Recent analysis of cross-sectional national data
15 shows Asian Americans are the least likely ethnic group to
16 receive recommended diabetes screening, with a 34% lower rate
17 of diabetes screening than white Americans; and

18 WHEREAS, The World Health Organization recommends
19 screening Asian patients at a lower body mass index than
20 non-Hispanic whites, and the 2015 official guidelines of the
21 American Diabetes Association recommend that Asian Americans
22 should be tested for type 2 diabetes at a body mass index of

1 23; and

2 WHEREAS, The Asian American, Native Hawaiian, and Pacific
3 Islander Diabetes Coalition has coordinated the Screen at 23
4 campaign with the support of over 40 national and regional
5 health organizations; and

6 WHEREAS, The State of Illinois has the opportunity to join
7 Hawaii, California, and Massachusetts as the fourth state to
8 formally recognize and recommend screening adult Asian
9 Americans for type 2 diabetes at a body mass index of 23,
10 enabling thousands of individuals to get the early care and
11 treatment needed to live healthier and happier lives;
12 therefore, be it

13 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE
14 HUNDREDTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that we
15 endorse and support the Screen at 23 campaign and urge the
16 Illinois Department of Public Health to endorse and support the
17 Screen at 23 campaign's efforts to increase awareness of
18 diabetes among Asian American communities, including using
19 appropriate screening measures for Asian American patients,
20 and to eliminate disparities; and be it further

21 RESOLVED, That the Illinois Department of Public Health is
22 urged to actively encourage, via existing communication

1 protocols and internal mechanisms, all public and private
2 health providers and facilities to also participate in these
3 efforts; and be it further

4 RESOLVED, That suitable copies of this resolution be
5 delivered to the Governor and the Director of Public Health.