

Information for Action # 2011-11

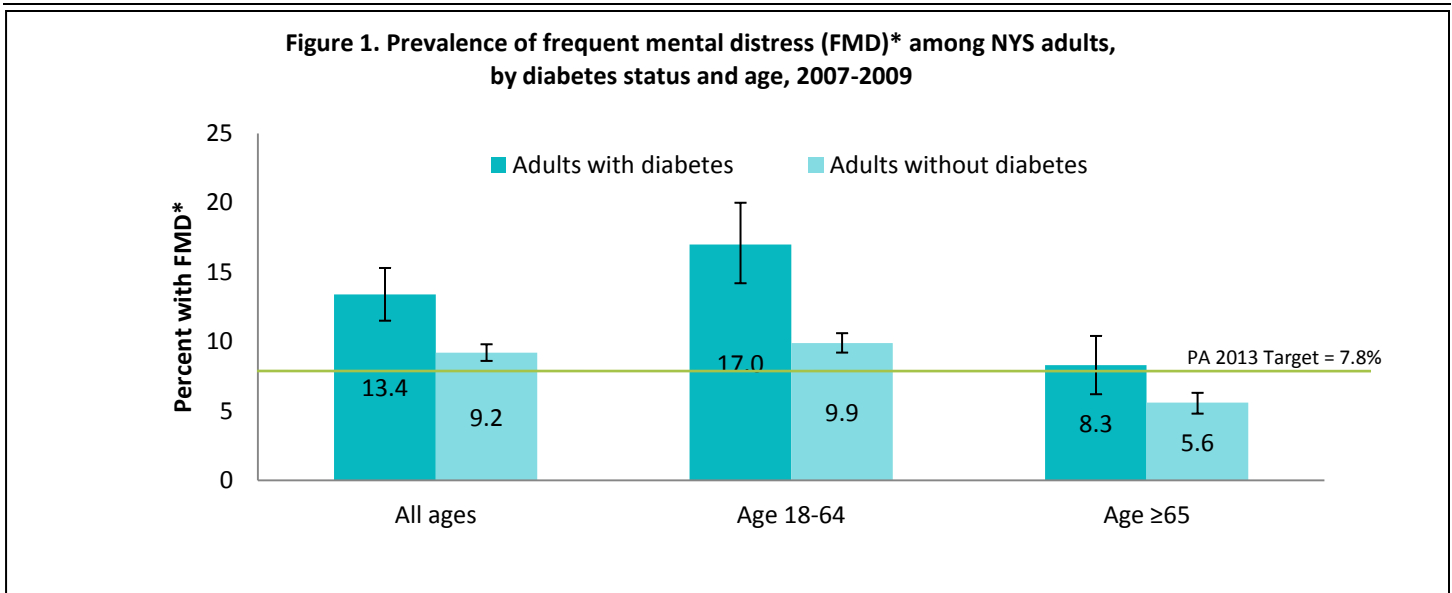
Diabetes and Frequent Mental Distress

Quick facts:

- Frequent mental distress* is more common among New York State adults with diabetes (13.4%) than those without diabetes (9.2%) (see Figure 1).
- Among younger adults ages 18-64, those with diabetes are nearly twice as likely to report frequent mental distress (17.0%) than those without diabetes (9.9%) (see Figure 1).
- The prevalence of frequent mental distress among adults with diabetes exceeds the goal of 7.8% for all adult New Yorkers established by the *Prevention Agenda Toward the Healthiest State* (PA 2013 Target).

Public health importance:

- Frequent mental distress increases the risk of diabetes complications.¹
- Recent evidence indicates that diabetes is a risk factor for clinical depression.²
- Among adults with diabetes, total health care expenditures for those diagnosed with depression are 4.5 times higher than for those without depression.³
- Diabetes outcomes can be improved with assessment and referral to diabetes self-management education programs that address psychosocial issues and behavioral strategies.⁴



Data Source: NYS Behavioral Risk Factor Surveillance System 2007-2009.

*Frequent mental distress (FMD) is defined as 14 or more mentally unhealthy days in the past 30 days.

PUBLIC HEALTH OPPORTUNITY

Assessment of psychological condition and referral to diabetes self-management programs can decrease frequent mental distress and reduce the risk of diabetes complications, especially among adults under the age of 65.

Contact:

For more information about the data included and their specific implications for action, please send an email to DCDIPIFA@health.state.ny.us with IFA # 2011-11 in the subject line.

References:

- ¹. Harkness E, et al. Identifying psychosocial interventions that improve both physical and mental health in patients with diabetes. *Diabetes Care* 2010; 33 (4): 926-30.
- ². Golden SH, et al. Examining a bidirectional association between depressive symptoms and diabetes. *JAMA* 2008; 299(23): 2751-9.
- ³. Egede LE, et al. Comorbid depression is associated with increased health care use and expenditures in individuals with diabetes. *Diabetes Care* 2002; 25 (3): 464-70.
- ⁴. American Diabetes Association. Standard of medical care in diabetes – 2011. *Diabetes Care* 2011; 34(S1): S11-S61.