[Diabetes mellitus in Spain: death rates, prevalence, impact, costs and inequalities].


Author information

Affiliations


DOI: 10.1157/13086022  PMID: 16539961

Abstract

OBJECTIVE: Describing the situation of diabetes mellitus (DM) in Spain from a public health perspective. MATERIAL AND METHOD: manual review of books and other documents on diabetes mellitus in Spain was conducted. In addition, a specific research of articles published using MeSH terms diabetes mortality, prevalence, incidence, cost, inequalities and Spain was conducted in Medline through Internet (PubMed). Minimun Basic Data Set was utilized as source for complication description by Communities Autonomus. RESULTS: DM is one of the leading cause of mortality and the third one in women. With regard to Autonomous Communities, Canary Islands, Ceuta y Melilla and Andalusia show the greatest mortality with a downward trend. Diabetics present greater mortality than non diabetic patients, being complications the main cause of the over-mortality, especially ischemic heart disease. Estimations of prevalence for DM2 range from 4.8% to 18.7% and for DM1, from .08% to .2%. In pregnancy, it has been noted a prevalence ranging from 4.5% to 16.1%. With respect to incidence per year, it is estimated a range from 146 to 820 per 100,000 inhabitants for DM2 and a range from 10 to 17 new cases annually per 100,000 inhabitants for DM1. Costs for DM1 show very different results, averaging between 1,262 and 3,311 euro per people and year. There are differences for DM2 costs as well, averaging between 381 and 2,560 euro per patient and year. Total costs estimated range from 758 to 4,348 euro per person and year. Relationship between a low socioeconomic level (LSL) and DM2 risk has been proved. Moreover, it has been noted that the less LSL the worse is the disease control, coupled with a greater frequency and more frequent factors of DM2 risk. CONCLUSIONS: The knowledge about the situation of the DM as a Public Health problem in Spain is limited. Mortality data available does not gather its real magnitude, and prevalence, incidence, costs and inequalities research are very poor and hardly comparable. In spite of this degree of incertitude, we can state that DM is an important public health
problem with a continuous increase, especially DM2, if the appropriate prevention and control measures are not taken.

Full text links

Read article for free, from open access legal sources, via Unpaywall: https://doi.org/10.1157/13086022

Read article at publisher’s site (DOI): 10.1157/13086022

References

Articles referenced by this article (56)

Diagnosis and Classification of Diabetes Mellitus
AUTHOR UNKNOWN
Diabetes Care, (Suppl 1):S37-


Wild S, Roglic G, Green A, Sicree R, King H
Diabetes Care, (5):1047-1053
MED: 15111519

A potential decline in life expectancy in the United States in the 21st century.
MED: 15784668

Diabetes epidemiology as a tool to trigger diabetes research and care.
Zimmet PZ
Diabetologia, (5):499-518
MED: 10333041

What’s in a risk factor? "He who strikes the ball".
Capron L
Diabetes Metab, (1):6-13
MED: 12629442

The Sant Vincent Declaration
AUTHOR UNKNOWN
G Ital Diabetol, (Supl)


Multiple codification of the causes of death: from dying "of" to dying "from".
Garcia Benavides F, Godoy C, Perez S, Bolumar F
Gac Sanit, (29):53-57
MED: 1624230
Citations & impact

Impact metrics

52
Article citations
Jump to Citations

Citations of article over time

Alternative metrics

Altmetric
Discover the attention surrounding your research
https://www.altmetric.com/details/28921401

Smart citations by scite.ai
Explore citation contexts and check if this article has been supported or disputed.
https://scite.ai/reports/10.1157/13086022

Supporting 0
Mentioning 44
Disputing 1

Article citations

Cost-Effectiveness Analysis of Exenatide versus GLP-1 Receptor Agonists in Patients with Type 2 Diabetes Mellitus.
Capel M, Ciudin A, Mareque M, Rodríguez-Rincón RM, Simón S, Oyagüez I
Pharmacoecon Open, 4(2):277-286, 01 Jun 2020
Cited by: 0 articles | PMID: 31338828 | PMCID: PMC7248155
Free to read & use

Diagnosed diabetes and optimal disease control of prisoners in Catalonia.
Rev Esp Sanid Penit, 22(1):16-22, 01 Jan 2020
Cited by: 0 articles | PMID: 32406477 | PMCID: PMC7307654
Free to read & use


The overall prevalence of diabetes mellitus adjusted for age and sex was 13.8% (95% CI 12.8, 14.7%), of which about half had unknown diabetes: 6.0% (95% CI 5.4, 6.7%). The age- and sex-adjusted prevalence rates of isolated impaired fasting glucose (IFG), isolated impaired glucose tolerance (IGT) and combined IFG–IGT were 3.4% (95% CI 2.9, 4.0%), 9.2% (95% CI 8.2, 10.2%) and 2.2% (95% CI 1.7, 2.7%), respectively. The prevalence of diabetes and impaired glucose regulation increased significantly with age (p < 0.0001), and was higher in men than in women (p < 0.001).

We undertook, for the first time in Spain, a representative study of the prevalence of diabetes and IGR for the whole country, and evaluated its association with various risk factors. Methods. Population. See the total deaths and age adjusted death rate for Diabetes Mellitus Spain. According to the latest WHO data published in 2018 Diabetes Mellitus Deaths in Spain reached 10,074 or 2.99% of total deaths. The age adjusted Death Rate is 6.82 per 100,000 of population ranks Spain #165 in the world. Review other causes of death by clicking the links below or choose the full health profile. Leading Causes of Death Spain Click each link to see data. Life Expectancy. 1. Diabetes mellitus (DM), which is related to cardiovascular disease, is one of the main global health problems. In Ethiopia, information about this disease is known to be scarce. Objective. To assess the prevalence of diabetes mellitus and its risk factors among individuals aged 15 years and above. In this study, higher prevalence of diabetes mellitus was observed than the IDFA-projected estimate of DM for Ethiopia. Modifiable associated risk factors were also identified. The direct comparisons of prevalence rates might be difficult owing to different methodologies and diverse characteristics of the study participants. The present study revealed that the proportion of undiagnosed DM was 88.5% (Figure 1). This is quite higher than the reports from South Africa [19] and India [20].