

# Diabetes Basics

## What is diabetes?

Diabetes is a disease in which blood glucose levels are above normal. Most of the food we eat is turned into glucose, or sugar, for our bodies to use for energy. The pancreas, an organ that lies near the stomach, makes a hormone called insulin to help glucose get into the cells of our bodies. When you have diabetes, your body either doesn't make enough insulin or can't use its own insulin as well as it should. This causes sugar to build up in your blood.

Diabetes can cause serious health complications including heart disease, blindness, kidney failure and lower-extremity amputations. Diabetes is the sixth leading cause of death in the United States.

For more information, see the National Diabetes Information Clearinghouse publication, [Your Guide to Diabetes: Type 1 and Type 2.](#)

## What are the symptoms of diabetes?

People who think they might have diabetes must visit a physician for diagnosis. They might have some or none of the following symptoms:

- Frequent urination
- Excessive thirst
- Unexplained weight loss
- Extreme hunger
- Sudden vision changes
- Tingling or numbness in hands or feet
- Feeling very tired much of the time
- Very dry skin
- Sores that are slow to heal
- More infections than usual

Nausea, vomiting or stomach pains may accompany some of these symptoms in the abrupt onset of insulin-dependent diabetes, now called type 1 diabetes.

## What are the types of diabetes?

**Type 1 diabetes**, which was previously called insulin-dependent diabetes mellitus (IDDM) or juvenile-onset diabetes, may account for 5-10 percent of all diagnosed cases of diabetes.

**Type 2 diabetes**, which was previously called non-insulin-dependent diabetes mellitus (NIDDM) or adult-onset diabetes, may account for about 90-95 percent of all diagnosed cases of diabetes.

**Gestational diabetes** is a type of diabetes that only pregnant women get. If not treated, it can cause problems for mothers and babies. Gestational diabetes develops in 2-5 percent of all pregnancies but usually disappears when a pregnancy is over.

**Other specific types of diabetes** resulting from specific genetic syndromes, surgery, drugs, malnutrition, infections and other illnesses may account for 1-2 percent of all diagnosed cases of diabetes.

### **What are the risk factors for diabetes?**

Risk factors for type 2 diabetes include older age, obesity, family history of diabetes, prior history of gestational diabetes, impaired glucose tolerance, physical inactivity and race/ethnicity. African Americans, Hispanic/Latino Americans, American Indians and some Asian Americans and Pacific Islanders are at particularly high risk for type 2 diabetes.

Risk factors are less well defined for type 1 diabetes than for type 2 diabetes, but autoimmune, genetic and environmental factors are involved in developing this type of diabetes.

Gestational diabetes occurs more frequently in African Americans, Hispanic/Latino Americans, American Indians and people with a family history of diabetes than in other groups. Obesity is also associated with higher risk. Women who have had gestational diabetes are at increased risk for later developing type 2 diabetes. In some studies, nearly 40 percent of women with a history of gestational diabetes developed diabetes in the future.

Other specific types of diabetes, which may account for 1-2 percent of all diagnosed cases, result from specific genetic syndromes, surgery, drugs, malnutrition, infections and other illnesses.

### **What is the treatment for diabetes?**

Healthy eating, physical activity and insulin injections are the basic therapies for type 1 diabetes. The amount of insulin taken must be balanced with food intake and daily activities. Blood glucose levels must be closely monitored through frequent blood glucose testing.

Healthy eating, physical activity and blood glucose testing are the basic therapies for type 2 diabetes. In addition, many people with type 2 diabetes require oral medication, insulin or both to control their blood glucose levels.

People with diabetes must take responsibility for their day-to-day care, and keep blood glucose levels from going too low or too high.

People with diabetes should see a health care provider who will monitor their diabetes control and help them learn to manage their diabetes. In addition, people with diabetes may see endocrinologists, who may specialize in diabetes care; ophthalmologists for eye examinations; podiatrists for routine foot care; and dietitians and diabetes educators who teach the skills needed for daily diabetes management.

*Source: <http://www.cdc.gov/diabetes/faq/basics.htm#top>*