



Today's Diabetes Crisis

An Appeal For Modifications that Alter America's Future

November is National Diabetes Awareness Month and with the holidays on the horizon, our tendency to overindulge makes this a good time for bringing health promotion strategies to consciousness. According to the CDC, in 2010, there were 32,300,000 people in the United States with diabetes. (These numbers include those that were diagnosed and undiagnosed). The Institute for Alternative Futures takes existing data and makes predictions for future trends in diabetes, as well as in many other chronic illnesses. The Institute estimates that the number of Americans with diabetes will increase 64% by 2025 from 32,300,000 to 53,100,000. These numbers translate into the medical and societal cost of diabetes of approximately \$ 514.4 billion, which is an increase of 72% from 2010. Those astounding numbers could spark a wake-up call to create initiatives that could potentially alter predicted trends.

Imagine if your physician could do a single lab test that would determine with 100 % accuracy if and when you would be diagnosed with diabetes in your lifetime. How many of us would make the needed life style changes to avoid becoming diagnosed with diabetes, if we knew that these changes would alter our course? Likewise, consider that there was also a test with the same predictive capabilities for obesity that would tell us exactly when in our lives we would be obese, which is by definition, having a Body Mass Index (BMI) of equal to or greater than 30. It is likely that if we knew that we would develop these conditions with certainty, we would eat healthier and exercise regularly. Yet with all of the published studies that provide data concerning the prevalence of diabetes, Americans remain passive about taking precautionary measures to reduce their risk in developing diabetes and in becoming obese. Numerous observational studies have established a relationship between obesity and the risks for cardiovascular disease, Type 2 diabetes, some forms of cancer, respiratory disorders, as well as an increase in overall mortality. It has been reported that 90 % of diabetes cases are attributed to excess weight. So why do Americans ignore the warnings and continue to gamble with their health and well-being? Perhaps we believe that without knowing for sure that we will develop diabetes, we can beat the odds and avoid the diagnosis, even when our parents and generations of relatives were met with essentially the same gene pool and misfortune of risk factors that prevented them from beating the odds.

According to the CDC, more than one third of US adults (more than 72 million persons) are obese. Furthermore, 30 % of children aged 2 to 19 years are overweight or obese. Despite the increasing research showing that obesity-related comorbid conditions are becoming more prevalent, payers sources fail to track obesity and morbidity of obese patients, making it difficult to provide intervention and case management. The Metabolic syndrome, a predecessor to type 2 diabetes and cardiovascular disease is characterized by several risk factors, which include: abdominal obesity, dyslipidemia (high triglycerides, low high-density lipoproteins, and high low-density lipoproteins), elevated blood pressure, as well as a pro-thrombotic and pro-inflammatory state. By avoiding obesity, we can significantly reduce our risk factors for developing the metabolic syndrome. Although physicians and their patients desire a variety of treatment options for obesity, payers require increased efficacy to consider formulary placement and are reluctant to remove utilization restrictions due to the problems associated with previous medications available, such as fenfluramine and phentermine (fen-phen). Bariatric surgery may be considered for patients with a BMI > 40 kg/m², or when BMI is > or equal to 35 and is associated with comorbid conditions. Interestingly, nearly 85% of payers believe that bariatric surgery is more effective than prescription medication for obesity management. They also report that bariatric surgery coverage has increased in the past 2 years.

INSIDE THIS ISSUE:

<i>Diabetes Crisis</i>	1
<i>National Homecare Month</i>	2
<i>Recipe... Yum</i>	3
<i>Word Search</i>	3
<i>Continued Article</i>	4



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Mihom Celebrates National Homecare Month

In honor of our nation's home care professionals, Mihom Healthcare Inc will join more than 2,200 home care agencies spanning from Key West to Pensacola and tens of thousands more agencies across the nation in kicking off the November celebration of National Home Care Month. The month-long celebration pays tribute to the dedicated home care professionals who enable senior citizens, the disabled and chronically ill individuals to live their lives where they want to most—in their homes.



HEMOCARE FACTS AND FIGURES

- ◆ **\$150** Average home care visit cost to Medicare
- ◆ **\$1,500** Average hospital visit cost to Medicare
- ◆ **\$8,475** Average annual cost to Medicaid for home and community based services
- ◆ **\$58,055** Average annual cost to Medicaid for nursing home care
- ◆ **\$7,000** Home care cost per month for ventilator-dependant adults
- ◆ **\$21,000** Hospital cost per month for ventilator-dependant adults
- ◆ **10,000** Number of Americans turning 65 and becoming Medicare beneficiaries every day since January 1st 2011.
- ◆ **150,000** Number of Floridians who are receiving home care services on any given day
- ◆ **2,200** Number of licensed home care agencies spanning from Key West to Pensacola

Every 13 seconds, another American turns 65 years old, a trend that will continue for the next 20 years. As the population ages, the home care industry will become increasingly important in the health care delivery system. Not only does home care offer the patient preferred setting, it is also cost effective. The average annual cost to Florida's Medicaid program for home care services is \$8,475 compared to \$58,055 for nursing home care. Cost disparities are similar for Medicare-funded home health services—a hospital visit is ten times more expensive than what it costs for one home care visit.

More than 2,200 home care agencies are serving more than 150,000 Floridians on any given day, said Bobby Lolley, Executive Director of the Home Care Association of Florida. "Whether the

patient is receiving skilled care, such as nursing or therapy, or personal care or homemaker/companionship services, home care professionals' ability to provide high-quality, cost effective care delivered in the patient's preferred setting is unparalleled in the health care industry."

Mihom Healthcare Inc, a state licensed and Medicare Certified Home Health Agency, opened its doors 9 years ago and has been servicing the Treasure Coast, Palm Beach and Okeechobee Counties of Florida.

Mihom Healthcare and its caring staff is proud to be a part of a hard working industry that has been serving the elderly and infirmed of our community. For more information please visit: www.mihom.com.

Learn more about National Home Care Month at:
www.homecarefla.org/noplacelikehome



12 Days of Christmas



N S D I A M F S E V E N C B G T
 E P F D L Z O X I S D T A O N T
 V G N I M M U R D R H T L J I Y
 E G X T V D R L U G N D L S Y T
 L C E S S E O M I E E A I A A R
 E N I B N R M E S N D N N M L U
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 O N H S R G H I H N T I B S E L
 L W A S X E N H L R L N I I R O
 V W T W E G V I C E E G R R T V
 N I N E S I R L M N A E D H R E
 P A R T R I D G E M E P S C A S
 T W E L F T H A K W I R I Q E E
 G N I K L I M T L H T W F N P E
 P I P E R S G N I P I P S S G G



Twelfth	Drumming	Leaping	Milking	Laying	Birds	Doves
Christmas	Eleven	Nine	Seven	Five	Three	Partridge
Truelove	Pipers	Ladies	Swans	Golden	French	Peartree
Sent	Piping	Dancing	Swimming	Rings	Hens	
Twelve	Ten	Eight	Six	Four	Two	
Drummers	Lords	Maids	Geese	Calling	Turtle	

EggNog Pudding

1 can 14oz sweet condensed milk
 1 1/2 cups half and half
 1 1/4 tsp nutmeg
 2Tbsp molasses
 1/3 cup Brandy

1/8 tsp salt
 4 Large Egg Yolks
 2 Tbsp Cornstarch plus
 1 tsp Cornstarch
 25 small ginger snap cookies

3/4 cup Heavy
 Cream
 1 1/2 tsp confec-
 tioners sugar



- 1. Make Pudding:** Fill large bowl with ice water and set aside. Bring the sweet milk, 1 cup of half /half, nutmeg, molasses, brandy and salt to a simmer. Stir occasionally to prevent burning. Remove from hear. Whisk egg yolks and 1/4 cup of half and half in med bowl. Slowly add in 1/4 cup of the hot mixture to the egg mixture. Stir together the cornstarch and remaining half and half in a medium bowl. Quickly whisk the cornstarch mixture into the hot milk mixture. Place the pan back on med heat whisking constantly until it boils. Remove from heat and add egg mixture stirring vigorously, place pan back on heat and cook until it simmers. Then remove from heat and strain into a med bowl. Cover with Plastic wrap and set in ice bath to cool. Refrigerate.
- 2. Assemble dessert** in a trifle bowl. Crush 1 ginger cookie and set aside. Combine heavy cream with the powdered sugar and beat to soft peaks. Alternate layers of cooled pudding, gingersnaps and cream. Use crushed cookie to decorate top. Refrigerate for at least one hour . Bon appetite!

The evidence that diabetes is preventable by modifying our lifestyle, is overwhelming. Diets that can promote weight maintenance or weight loss and participating in regular exercise are the keys to preventing diabetes and obesity. Despite all the evidence, Americans lack the motivation needed to make significant strides toward achieving better health. It has been suggested that in the not so distant future, health insurance companies may deny benefits on the basis of patient non-compliance with physician recommendations such as weight loss, or tobacco dependence, which in essence, is bound to compound the problem if patients are unable to comply. So there is no time like the present for Americans to be creative in developing their own incentives. As a nation, the challenge is to develop public health approaches that support people with making lifestyle changes at a minimal cost that are also accessible.

We consulted Dr. Paul Graham for his expertise on diabetes, as an Endocrinologist, for his advice is helping patients to achieve weight loss, and improve their health by achieving treatment goals, such as improved blood sugar, blood pressure, and cholesterol levels. Dr. Graham attended the University of Rochester School of Medicine and Dentistry in Rochester, New York, and graduated in 1980. He did his residency in Internal Medicine (1980-83) and Fellowship in Endocrinology (1985-87) at Wilford Hall USAF Medical Center, Lackland Air Force Base, in San Antonio, Texas. He is in private practice at Diabetes & Endocrine Associates along with Dr. Denise Tonner, and Dr. William Lasswell. Dr. Graham sends his patients with a new diagnosis of diabetes to a dietician for counseling. Even patients that have had diabetes for years may be referred for nutrition counseling, since proper nutrition is an integral part of diabetes management. He recommends that parents allow for their children to play outdoors instead of remaining sedentary in front of the television or playing computer games, in an effort to prevent Type 2 diabetes in children. Also, Dr. Graham attributes excessive consumption of fast foods to the increase in obesity amongst our youth. He explains that adults having difficulty with weight loss may benefit from counseling that incorporates behavior modification that focuses on changing poor lifestyle habits, such as a lack of routine exercise. He adds that sometimes, emotions come in to play, as with stress eating and depression, causing excessive weight gain. Dr. Graham states "For patients with diabetes, who also need to lose weight, I sometimes prescribe a GLP-1 agonist, such as Byetta, Bydureon, and Victoza". He explains that most patients will lose 10 to 15 lbs. and control their blood sugars better within a few months. These medications can be used to manage blood sugars before having to add insulin, or in patients who are already on insulin, they may be added, allowing for an adjustment to a lower dose of insulin when used in combination. If you have any further questions for Dr. Paul Graham, he may be reached at:

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**MIHOM Healthcare is a Medicare Certified Agency servicing the Treasure Coast of Florida:
Indian River, Martin, Okeechobee, Palm Beach and Saint Lucie Counties.**



Our Services include:

- ♥ Skilled Nursing Speech Pathology ♥
- ♥ Physical Therapy Occupational Therapy ♥
- ♥ Professional Care Management Medical Social Work ♥
- ♥ Home Health Aide Hourly Private Duty ♥
- ♥ In-home Telemonitoring



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