



# Indian Health Service Press Release

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## **Special Diabetes Program for Indians Demonstration Projects show successful results**

A five-year Indian Health Service (IHS) demonstration project indicates that risk factors for diabetes and cardiovascular disease can be reduced among American Indians and Alaska Natives, who have the nation's highest rates of diabetes.

The IHS implemented the **Special Diabetes Program for Indians (SDPI) Diabetes Prevention and Healthy Heart Demonstration Projects** in response to the diabetes epidemic in American Indian and Alaska Native communities.

The SDPI was established by Congress in 1997 to fund diabetes prevention and treatment services in IHS, tribal, and urban Indian health programs.

In 2004, Congress established the SDPI Demonstration Projects as an additional initiative to apply research findings in real-world settings to prevent diabetes and cardiovascular disease. The SDPI Demonstration Projects consist of two initiatives: The SDPI Diabetes Prevention Program and the SDPI Healthy Heart Project. Overall, 66 grants were funded that served 110 tribal communities.

“The SDPI Demonstration Projects grantees have shown that it is possible to translate the results of prevention research into diverse Indian health settings,” said HHS Secretary Kathleen Sebelius. “We know from their work that it is possible to reduce risk factors for diabetes and cardiovascular disease in American Indian and Alaska Native communities.”

**The SDPI Diabetes Prevention Program Demonstration Project** was funded in 36 IHS, tribal, and urban Indian health programs to implement the 16-session lifestyle curriculum used in the original National Institutes of Health funded Diabetes Prevention Program research study.

Using a method adapted for Native patients, people at risk for diabetes were encouraged to lose weight through increased physical activity, healthy eating habits, and individual and group coaching.

On average, those who completed the follow-up assessment had a significantly reduced eight-year risk of developing diabetes. The diabetes incidence rate of participants (4.3% per year), when compared to the NIH Diabetes Prevention Program study, was similar to the NIH study's lifestyle intervention group and lower than the placebo group (11% per year) in that study. Enrollees also achieved significant weight loss, increased physical activity, improved consumption of healthy foods, lower blood pressures, lower glucose levels, and improved health-related quality of life at the follow-up and annual assessments compared to baseline.

**The SDPI Healthy Heart Demonstration Project** was funded in 30 IHS, tribal and urban Indian health programs to implement an intensive, clinic-based case management intervention to reduce cardiovascular disease risk factors in individuals with diabetes. Enrollees who completed the follow-up assessment had a significantly reduced 10-year risk of developing coronary heart disease. Enrollees also had significant improvements in meeting goals for control of blood pressure and blood glucose and achieved improved lipid profiles. For example, the percent of enrollees with blood pressures < 130/80 mmHg increased from 42% at baseline to 49% at the first annual assessment. Enrollees also achieved increased physical activity, increased use of aspirin, and more became non-smokers from baseline to annual assessments.

“The SDPI Diabetes Prevention and Healthy Heart Project grantees achieved these outstanding results through a collaborative approach to developing innovative and creative prevention strategies,” said Dr. Yvette Roubideaux, IHS Director. “IHS is now planning to disseminate their positive results, best practices, and lessons learned throughout Indian country.”

In September 2010, the IHS competitively awarded 69 cooperative agreements to previous and new sites to continue to implement the SDPI Diabetes Prevention and Healthy Heart Initiatives and to help disseminate best practices from the experience of the demonstration projects over the past five years. The selected sites are meeting in Albuquerque, NM, in November to begin this new phase of these initiatives. The sites will continue to evaluate their progress and will receive technical assistance as they implement program activities.

“The new cohort of sites will share successful strategies from the demonstration projects at their first meeting and will develop dissemination strategies to share this information with all other SDPI grant programs in the coming years,” said Dr. Kelly Acton, director of the IHS Division of Diabetes Treatment and Prevention. “We look forward to working with them to continue these successful programs and to share their best practices and lessons learned with other programs.”

For more information on the SDPI and the Diabetes Prevention and Healthy Heart Initiatives, please go to <http://www.ihs.gov/MedicalPrograms/Diabetes/index.cfm?module=programsSDPI> .

*NOTICE TO EDITORS: For additional information on this subject, please contact the public affairs staff at 301-443-3593. Additional information about the IHS is available on the IHS website at <http://www.ihs.gov> .*