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S.C.R. NO. 49 S.D. 1

SENATE CONCURRENT RESOLUTION

URGING THE DEPARTMENT OF HEALTH TO ENDORSE THE "SCREEN AT 23" CAMPAIGN THAT SCREENS ADULT ASIAN AMERICANS FOR TYPE 2 DIABETES AT A BODY MASS INDEX OF 23.

WHEREAS, approximately 130,000 people, or 9.1 percent of the population, in Hawaii have diabetes, 442,000 or 30.9 percent have pre-diabetes, and residents of Asian American heritage comprise approximately 56.2 percent of the population of Hawaii; and

WHEREAS, diabetes is the fifth leading cause of death among Asian Americans; and

WHEREAS, Asian Americans are 30 percent more likely to have diabetes than White Americans and are also at greater risk of developing pre-diabetes, diabetes, and associated risks at a lower body mass index than White, Hispanic, Black, or Native 13 Americans; and

WHEREAS, Asian Americans face a health care disparity in type 2 diabetes detection and diagnosis, as the current guidelines for screening Asian Americans at a body mass index of 25 not only miss 32 percent of diabetes diagnoses in Hawaii, but also underestimate the prevalence of pre-diabetes among Asian Americans; and

WHEREAS, two out of three persons with type 2 diabetes die from heart attack or stroke, and adults with diabetes are at risk for developing end stage renal disease and kidney failure, blindness, and lower limb loss; and

WHEREAS, the per capita health care cost of diabetes in the State is \$14,377 per year, while the annual cost for diabetes in the State is \$1,500,000,000 in medical costs and \$400,000,000 in indirect costs and productivity loss; and

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WHEREAS, the United States Preventative Services Task Force recommends earlier screening for persons who are members of certain ethnic groups, such as African Americans, American Indians, Alaskan Natives, Asian Americans, Hispanics or Latinos, or Native Hawaiians or Pacific Islanders, as they may be at increased risk for diabetes at a younger age or at a lower body mass index; and

WHEREAS, early detection and treatment can mitigate diabetes-related complications, risks, and costs; and

WHEREAS, interventions focusing on nutrition, physical activity, and healthy weight loss have been shown to reverse pre-diabetes, improve glucose function in people with diabetes, and reduce the need for multiple medications; and

WHEREAS, screening Asian American patients at a body mass index of 23 instead of 25 would unmask thousands of new diabetes cases and more than three times that amount of new pre-diabetes cases in the State, thereby initiating treatment or early interventions to reduce negative co-morbidities like heart diseases, kidney diseases, and limb amputation; and

WHEREAS, the National Institutes of Health recently found that more than half of Asian Americans with diabetes are undiagnosed, and community based participatory research and studies on Asian American subpopulations have shown that Asian Americans develop diabetes at a lower body mass index; and

WHEREAS, the World Health Organization recommends screening Asian patients at a lower body mass index than non-Hispanic Whites, and the 2015 official quidelines of the American Diabetes Association recommend that Asian Americans should be tested for type 2 diabetes at a body mass index of 23; and

WHEREAS, the Asian American, Native Hawaiian, and Pacific Islander Diabetes Coalition has coordinated the "Asian BMI" efforts of over 15 national and regional organizations, culminating in the launch of the "Screen at 23" campaign; and

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WHEREAS, Hawaii has the opportunity to be one of the first states to formally recognize and recommend screening adult Asian Americans for type 2 diabetes at a body mass index of 23, enabling thousands of individuals to get the early care and treatment needed to live healthier lives; now, therefore,

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BE IT RESOLVED by the Senate of the Twenty-eighth Legislature of the State of Hawaii, Regular Session of 2016, the House of Representatives concurring, that the Department of Health is urged to endorse the "Screen at 23" campaign's efforts to increase awareness of diabetes among Asian American communities and to eliminate disparities; and

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BE IT FURTHER RESOLVED that the Department of Health is also urged to encourage all public and private health care providers and facilities to participate in these efforts; and

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BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the Governor and Director of Health.