

Cannabinoids and Health

Module 7

Lecture 2: Current Treatments for Obesity and Type II Diabetes

Type 2 Diabetes

- Complex disease with many risk factors
- Symptoms include:
 - increased thirst and urination
 - increased hunger
 - feeling tired
 - blurred vision
 - numbness or tingling in the feet or hands
 - sores that do not heal
 - unexplained weight loss
- Symptoms develop slowly (over years) and some people have no symptoms at all

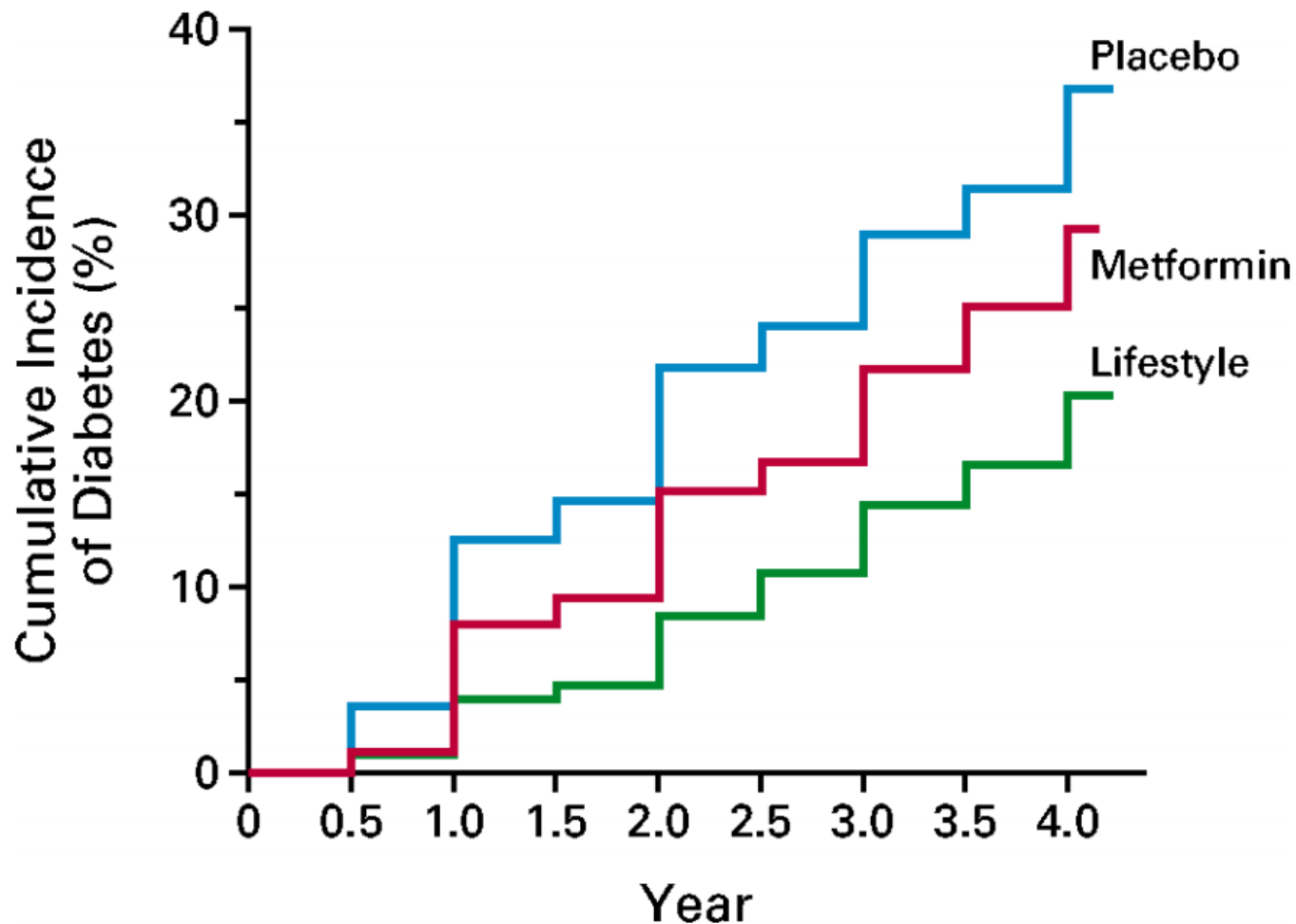
Diagnosing Type 2 Diabetes

- One-time blood tests (fasting blood glucose test, hemoglobin A1c test)
 - Higher values at one time point or on average (A1c) suggest Type 2 Diabetes
- Oral glucose tolerance test (OGTT) – done after 8 hour fast
 - Baseline blood is drawn
 - Consume glucose beverage
 - Additional blood drawn 1 hour and again 2 hours after glucose beverage
 - If glucose is still high at 2 hour time point, Type 2 Diabetes is suggested

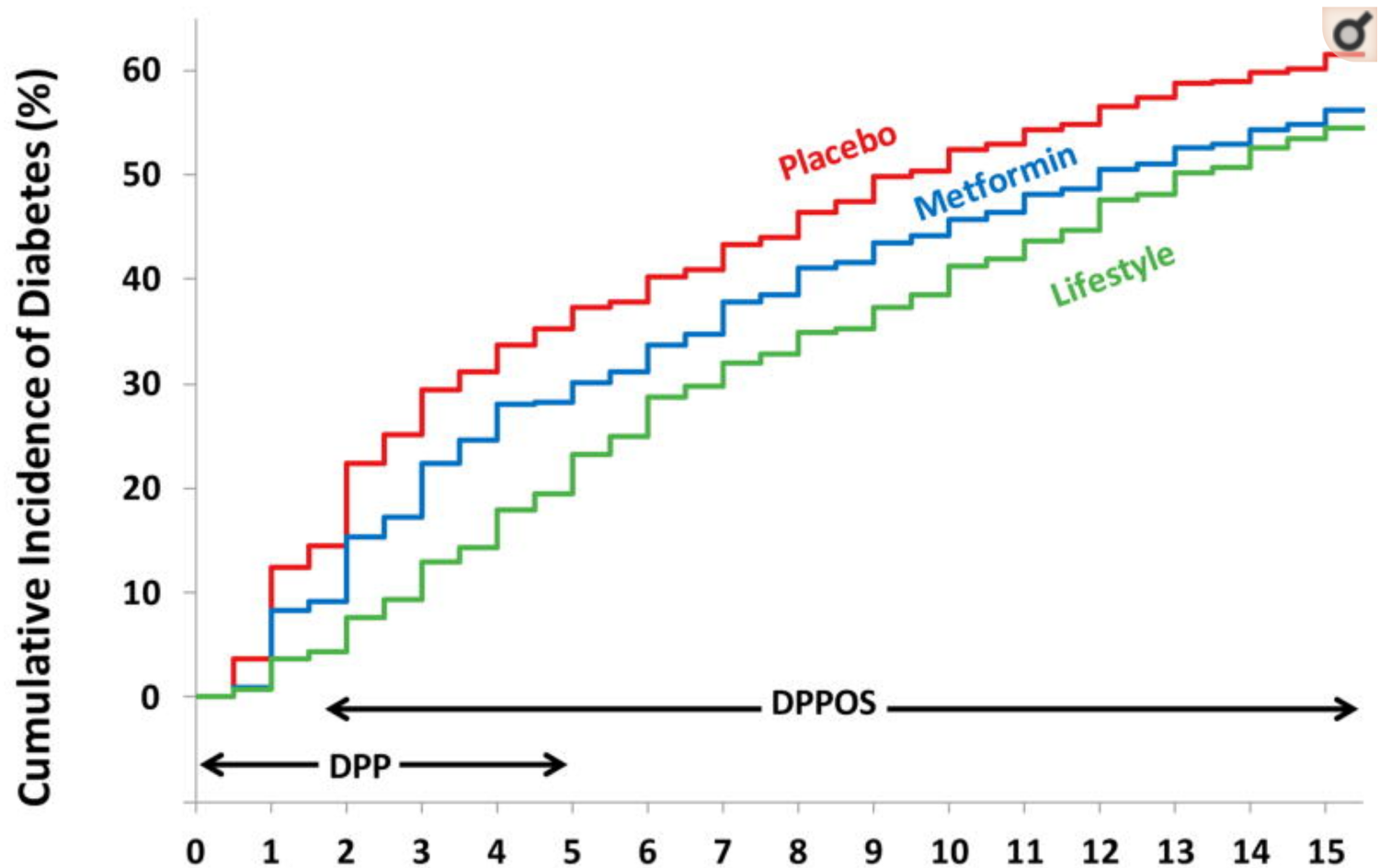
Prevention – the case of prediabetes

- Prediabetes is a state of elevated blood glucose and A1c levels, but not so high that criteria for diabetes diagnosis is met
- Largest study on prediabetes is the Diabetes Prevention Program (DPP)
- The DPP was a randomized controlled trial of 3234 adults with prediabetes. They were randomly assigned to
 - Placebo (n = 1082)
 - Metformin (n = 1073)
 - Intensive lifestyle intervention (n = 1079)

Outcomes of DPP

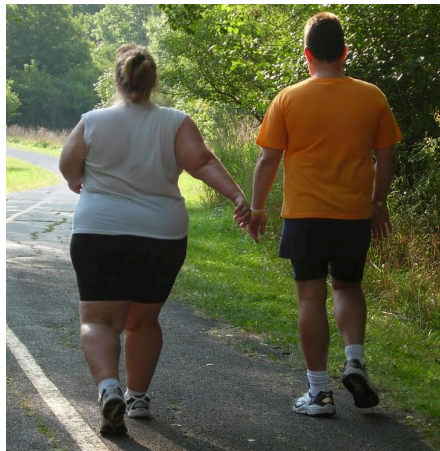


Long-term Outcomes of DPP



Preventing Prediabetes from turning into Diabetes

- Just as with overall prevention of diabetes, intensive changes in behavior, particularly those that result in weight loss, are the best method
 - Healthy Diet
 - Increasing Physical Activity
 - Decreasing Sedentary Behavior



Treatment - Behavioral

- **Diet:** following a diet rich in vegetables, fruits and lean proteins and low in (particularly processed) carbohydrates helps manage blood glucose, blood pressure, and cholesterol.
- **Physical Activity:** exercising at moderate intensity or higher at least 30 minutes a day on most days of the week lowers blood glucose levels, lowers blood pressure and improves blood flow
- **Monitoring glucose:** blood glucose monitoring can help with decisions about food, physical activity, and medicines.
- **STOP SMOKING!!!!**

Treatment - Medical

- **Insulin:** can be given with individual injections or via a pump
- **Metformin:** lowers the amount of glucose that the liver makes and helps the body use insulin better
 - Also the drug used in DPP to prevent transition to diabetes



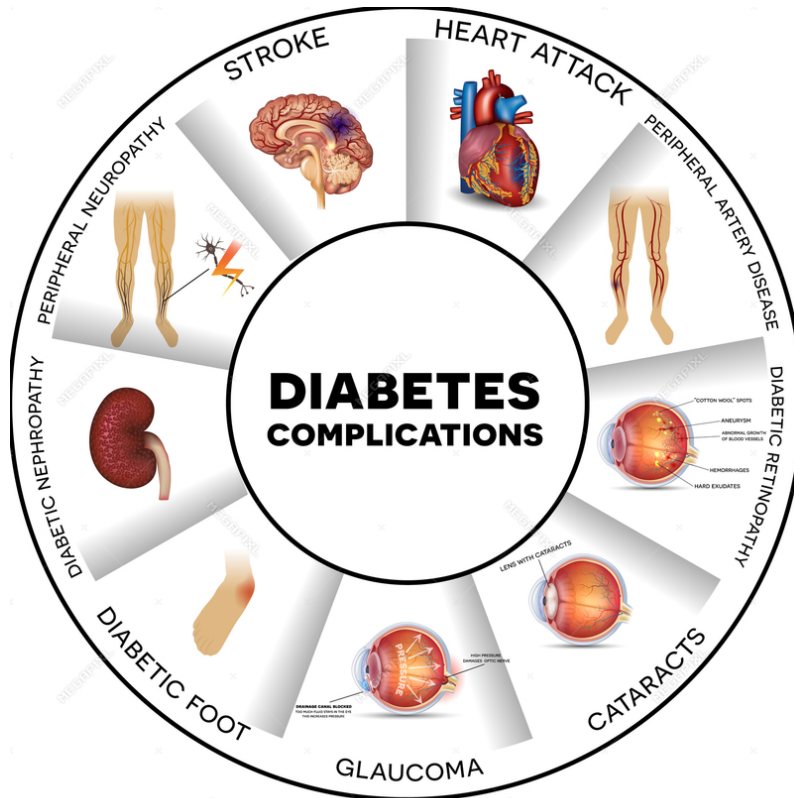
Challenges of Treatment

- Effective behavioral and medical treatments DO exist
- But treatment is complex (glucose monitoring, insulin dosing, diet, physical activity, other lifestyle changes, etc. etc.)
- So ADHERENCE to treatment is problematic

State of Adherence

- Only about 50% of adults with Type 2 Diabetes:
 - achieve recommended targets for blood glucose levels
 - achieve recommended blood pressure targets
 - achieve recommended levels of cholesterol
- Taken together, less than 20% of patient achieve all three of the 'ABCs' of diabetes management (A1c, Blood pressure, and Cholesterol) targets.
- Much of this is driven by poor adherence to behavioral lifestyle changes (diet and physical activity)

Consequences of Non-adherence



- Nonadherence to treatment is related to a number of negative consequences including

- worse glycemic control
- increased risk for hospitalization

Increased risk for complications all-cause mortality

Diabetic Neuropathy – some detail

- Diabetic neuropathy is a type of nerve damage that results from injury to the nerves caused by high blood sugar
- Most common form in diabetes is **Peripheral Neuropathy** which affects the feet and legs first, then the hands and arms
- Symptoms include:
 - Numbness or reduced ability to feel pain or temperature changes
 - Tingling or burning sensation
 - Sharp pains or cramps
 - Increased sensitivity to touch Muscle weakness
 - Loss of reflexes, especially in the ankle
 - Loss of balance and coordination
 - Serious foot problems, such as ulcers, infections, and bone and joint pain

Treatment for Neuropathy

- Notably, there is NO KNOWN CURE for neuropathy
- Goals of treatment are to:
 - Slow progression (keep it from getting worse)
 - Manage complications and restore function
 - Relieve pain
- Neuropathic pain is often treated with
 - **Anti-seizure drugs** including pregabalin (Lyrica), gabapentin (Gralise, Neurontin) and carbamazepine (Carbatrol, Tegretol).
 - Side effects may include drowsiness, dizziness and swelling.
 - **Antidepressants** including tricyclics (Norpramin, Tofranil) and serotonin and norepinephrine reuptake inhibitors (Cymbalta, Effexor).
 - Side effects depending on exact medication include dry mouth, sweating, weight gain (NOT good in diabetes) nausea, sleepiness, dizziness, decreased appetite and constipation.

- Public health costs of diabetes epidemic are very high
- Tremendous decreases in quality of life and even life expectancy
- But ECONOMIC costs are also a huge burden

THE STAGGERING COSTS OF **DIABETES**



More than
30 MILLION
Americans
have diabetes



Health care costs for
Americans with
diabetes are
2.3X greater
than those without
diabetes



Diagnosed
diabetes
costs
America

**\$327
BILLION**
per year



84 MILLION
Americans have prediabetes



\$1 IN \$7

Health care dollars is spent treating
diabetes and its complications



Today, **4,110** Americans will
be diagnosed with diabetes.
Additionally, diabetes will
cause **295** Americans to
undergo an amputation and
137 will enter end-stage
kidney disease treatment.

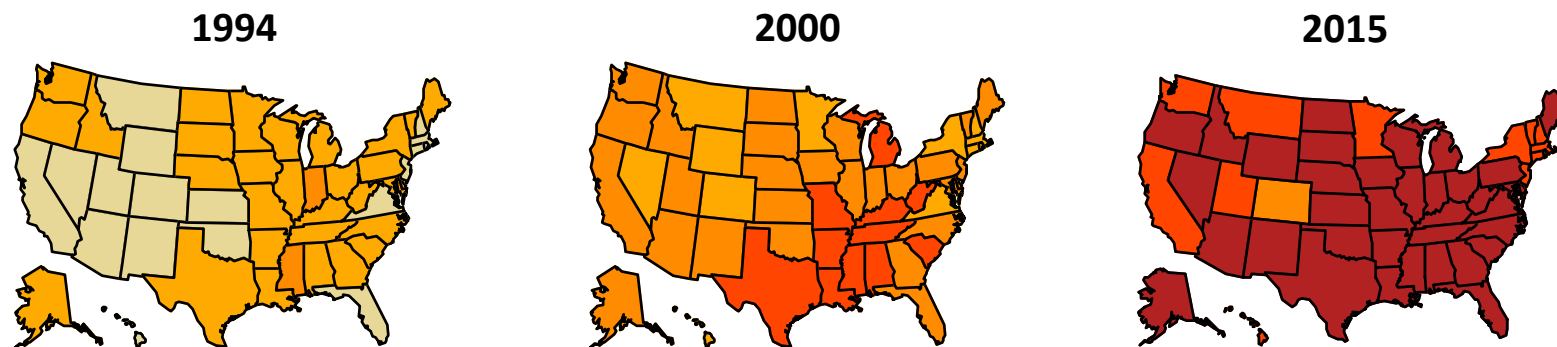
Learn how to fight this costly disease
at diabetes.org/congress



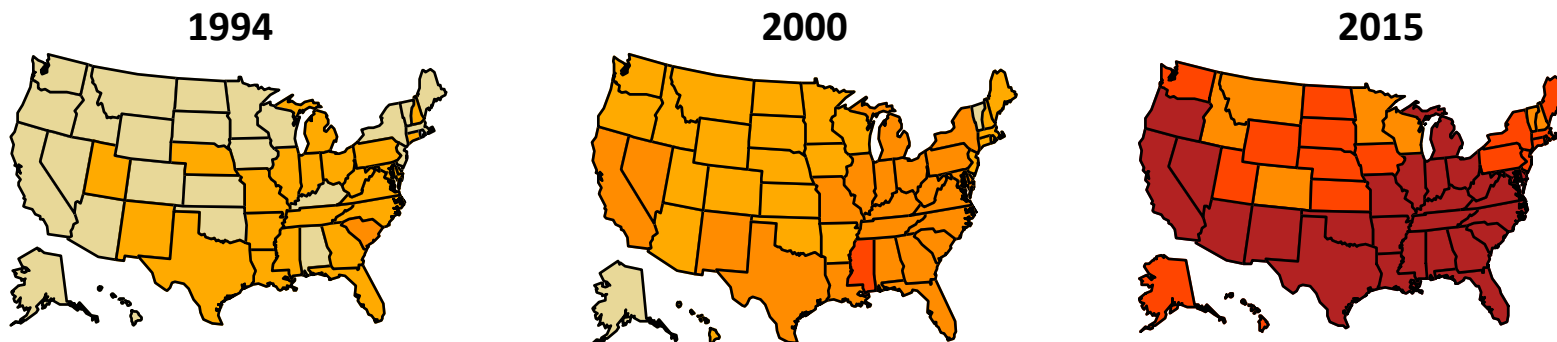
Summary

- Type 2 Diabetes is a very serious chronic illness
- There ARE successful prevention approaches, even for people with prediabetes
 - Diet
 - Physical activity
 - Medication (metformin)
- Once diabetes is diagnosed, treatment is complex and adherence to treatment is less than ideal
- Thus, public health and economic costs are enormous

Age-adjusted Prevalence of Obesity and Diagnosed Diabetes Among US Adults



No Data
 <14.0%
 14.0%–17.9%
 18.0%–21.9%
 22.0%–25.9%
 ≥ 26.0%



No Data
 <4.5%
 4.5%–5.9%
 6.0%–7.4%
 7.5%–8.9%
 ≥ 9.0%

Obesity and Diabetes: Twin Epidemics

- Because obesity and diabetes go hand in hand, it is important to understand situations that may *increase* the problem or *decrease* the problem
- In our next module, we explore the intriguing question of what impact cannabis might have on obesity and diabetes?

