

Diabetes Mellitus - Part I

Diabetes is a disorder of sugar metabolism. It is characterized by high blood glucose levels. There are five types of diabetes.

Type 1 diabetes formerly called juvenile-onset or insulin dependent (*IDDM*) has a peak age at onset or insulin dependent (*IDDM*) of 12 years old. It is unusual to begin after age 40. Symptoms include excessive thirst, excessive urination, and weight loss.

Type 2 diabetes was formerly called adult-onset or noninsulin dependent (*NIDDM*). Eighty percent of *NIDDM* patients are obese. Patients generally are over age 40. Many have excessive thirst or urination, but some have no symptoms. Risk factors for the development of *NIDDM* are older age, obesity, positive family history and history of gestational diabetes.

Secondary diabetes can result from pancreatic disease, hormonal syndromes (*Cushing's syndrome*), drug-induced disease (*thiazide diuretics, steroids, phenytoin*) or those associated with genetic syndromes.

Impaired glucose tolerance (*IGT*) and **Impaired fasting glucose** (*IFG*) are also termed subclinical or borderline diabetes. Patients generally have no symptoms. Up to 40% go on to develop diabetes within 10 years. There is an increased risk of cardiovascular disease.

Gestational diabetes is a diagnosis for women who are first found to have glucose intolerance during a pregnancy. It is associated with increased perinatal complications. Risk factors for the development of gestational diabetes are older age, overweight, previous large or stillborn babies, or positive family history of diabetes. Women with a history of gestational diabetes have an increased risk of developing *NIDDM* (*as high as 50% within 10 years and 70% within 20 years*).

Diagnostic Criteria for Diabetes

- 1) Fasting blood glucose: 2 readings greater than or equal to 126 mg/dl
- 2) 75 gram oral glucose tolerance test:
Diabetes: 2-hour sample greater than 200 mg/dl
Impaired glucose tolerance: 2-hour sample between 140–200 mg/dl
- 3) 100 gram glucose tolerance test for pregnant women to screen for gestational diabetes:
2 readings that equal or exceed the following:
 - fasting greater than or equal to 105 mg/dl
 - 1 hour greater than or equal to 190 mg/dl
 - 2 hour greater than or equal to 165 mg/dl
 - 3 hour greater than or equal to 145 mg/dl

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Other laboratory studies used to monitor diabetes include glycosylated hemoglobin (*HbA1c*) and fructosamine. HbA1c gives an indication of glucose control over the preceding 60 days, and fructosamine (*glycosylated protein*) measures glucose control over a 20-day time span.

Treatment of diabetes includes diet, oral hypoglycemic agents, and insulin.

Basic Rating Guidelines for IDDM and NIDDM

Age at Issue	Time Since Diagnosis			
	1 month–7 years	8–14 years	15–20 years	Over 20 years
20-29	F	F	G	H
30-39	E	E	F	G
40-49	D	D	E	F
50-65	C	D	D	E
66 and over	B	C	D	D

The rating for diabetes mellitus depends upon the age at onset and the duration of the disease. The degree of diabetic control and any diabetic complications will heavily influence the rating. Good control and not requiring insulin will reduce the rating. A best case scenario with diagnosis over age 60, normal weight, good control by diet treatment only, and no complications can be considered without a rating. Diabetics are not considered until age 20.

To get an idea of how a client with a history of diabetes would be viewed in the underwriting process, please feel free to use the attached *Ask "Rx" pert underwriter* for an informal quote.

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Diabetes - Ask "Rx" pert underwriter
(ask our experts)

Producer _____ Phone _____ FAX _____
Client _____ Age/DOB _____ Sex _____

If your client has diabetes, please answer the following:

- ① Please list date when first diagnosed: _____
- ② How often does your client visit their physician? _____
(also note date of last visit)
- ③ The client's diabetes is controlled by:
 - diet alone
 - oral medication _____ *(medication & doses)*
 - insulin _____ *(amount of units/day)*
- ④ Is your client on any other medications?
 - yes, please give details _____
 - no
- ⑤ Please give the most recent blood sugar reading _____
- ⑥ Does your client monitor their own blood sugar? _____
- ⑦ If available, please give the most recent glycohemoglobin (HbA1c) or fructosamine level _____
- ⑧ Please check if your client has had any of the following:

<input type="checkbox"/> chest pain or coronary artery disease	<input type="checkbox"/> overweight
<input type="checkbox"/> protein in the urine	<input type="checkbox"/> elevated lipids
<input type="checkbox"/> neuropathy	<input type="checkbox"/> kidney disease
<input type="checkbox"/> retinopathy	<input type="checkbox"/> black out spells
<input type="checkbox"/> abnormal ECG	<input type="checkbox"/> hypertension
- ⑨ Has your client smoked cigarettes in the last 12 months?
 - yes
 - no
- ⑩ Does your client have any other major health problems (ex: cancer, etc.)?
 - yes, please give details _____
 - no

After reading the *Rx for Success* on Diabetes, please feel free to use this Ask "Rx" pert underwriter for an informal quote.

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The Prudential Insurance Company of America
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