

RESOLUTION

Subject: Reduce Consumption of Sugar-Sweetened Beverages in Kentucky

Submitted by: Greater Louisville Medical Society

Referred to: Reference Committee

WHEREAS, Kentucky ranks #6 in the country of number of people with Type 2 Diabetes: 12.5% of the population. It ranks 12th nationally (31.6%) in adult obesity, 6th nationally in obesity in 2-4 year olds, 8th nationally in 10-17 year olds, and 3rd nationally in obesity in high-school students; and

WHEREAS, in the past year, diabetes increased 18% from 10.6% to 12.5% of adults (1). The prevalence of diabetes has more than tripled since 1995 when an estimated 3.5% of adults had diabetes, compared to 10% in 2010, an increase of 158%. The current rate of diabetes nationally is 6.9%. If current trends continue, 1 in every 3 children born in the United States in 2000 is expected to develop diabetes in his or her lifetime, and for African American and Latino children, this figure is 1 in 2 (2); and

WHEREAS, research by the CDC has shown that approximately 27% of people with diabetes have not been tested and diagnosed. For Kentucky, this would mean that in addition to the 370,000 patients diagnosed with diabetes, another 137,000 have undiagnosed diabetes, for a total of 507,000 adults living with diabetes in our state; and

WHEREAS, in addition to the above, 233,000 Kentucky adults have been diagnosed with pre-diabetes and will progress to a diagnosis of diabetes if they do not receive proper medical care and take actions to halt the progress of the disease; and

WHEREAS, ten percent (10%) or 22,039 members of the Kentucky Employees Health Plan (2010) have diabetes. Medicaid members experience a very high rate of diabetes at 18% or 82,048 adults. In parts of eastern Kentucky, the rate of diabetes among Medicaid adults exceeds 20%; and

WHEREAS, nearly 30% of women who already have diabetes (not gestational diabetes) and become pregnant will be hospitalized prior to delivery. Over 60% of pregnant women with pre-existing diabetes (not gestational diabetes) will deliver by Cesarean section compared to 36% of pregnant women without diabetes; and

WHEREAS, emergency department visits for diabetes resulted in charges of \$23,709,718 in 2011. Hospitalizations for diabetes resulted in charges of \$183,000,000 in 2011; and

WHEREAS, a study conducted by the California Center for Public Health Advocacy, with UCLA, found that "...regardless of income or ethnicity, adults who drink one or more sodas a day are 27 percent more likely to be overweight or obese." There is a clear link between obesity and diabetes; and

WHEREAS, "Public health experts working to end the obesity epidemic have identified taxes on sugary drinks as the most cost-effective approach. The rationale is strong. The obesity epidemic has occurred in parallel with a 4-fold increase in soda consumption between 1950 and 2004. Sugar-sweetened beverages are the largest source of added sugars in the American diet and have been linked to obesity, diabetes, and heart disease" - "The Philadelphia Story: Attacking Behavioral and Social Determinants of Health"- Ann Intern Med. Published online 19 July 2016 doi:10.7326/M16-1570. "Tax on sugar sweetened beverages was associated with reductions in purchases of taxed beverages and increases in purchases of untaxed beverages"- BMJ 2016;352:h6704. In one study, a 0.04 cent per-calorie tax on sugar-sweetened beverages "soda tax" has been shown to reduce consumption by 5,800 calories per person annually and could do so at a lower cost to consumers than an ounce-based tax, according to a study published online by the American Journal of Agricultural Economics; now, therefore, be it

RESOLVED, that the Kentucky Medical Association urge physicians to educate their patients regarding the health effects of sugar-sweetened beverages and, if necessary, encourage patients to reduce consumptions of such beverages.