# Prevalence and Incidence

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Diabetes is becoming more common. The number of existing cases (prevalent cases) and new cases (incident cases) of diabetes are increasing and most of this increase is not due to the increasing age of the U.S. population.   Trends also show that minority and elderly populations are disproportionately affected by diabetes.

Between 1980 and 1994, the number of persons with diagnosed diabetes increased by 2.2 million, an increase of 39% (Figure 2.1; Table 2.1). In 1994, about 8.0 million persons in the United States (3.1% of the population) reported that they had diabetes mellitus (Figure 2.1; Table 2.8).

Between 1980 and 1994, the age-adjusted prevalence of diagnosed diabetes increased 16% compared with an increase of 21% in the crude prevalence (Figure 2.2; Table 2.8), indicating that less than 25% of the increase in prevalence is due to the aging of the U.S. population. This increase appears to be a recent trend, with about two-thirds of the increase in age-adjusted prevalence having occurred in the 1990s.
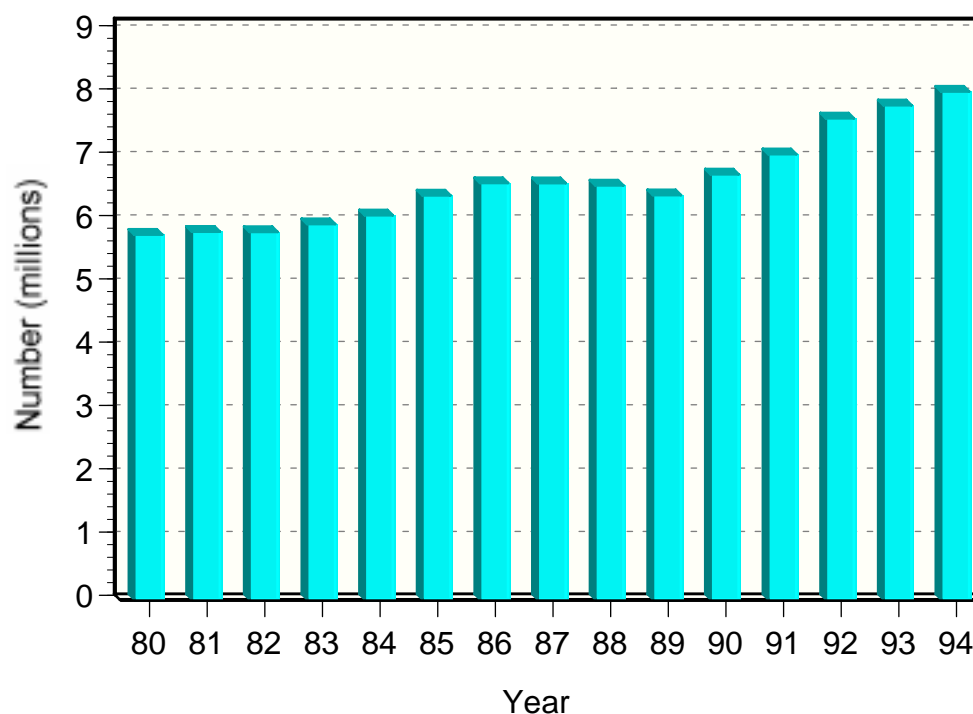

Figure 2.1: Number of Persons with Diabetes, United States, 1980-1994.

The age-adjusted prevalence of diagnosed diabetes was higher among blacks than whites throughout the 1980s and early 1990s and was highest among black females (Figure 2.3; Tables 2.11-2.14). The rate of increase between 1980 and 1994 in age-adjusted prevalence was highest among black males (29% increase) and lowest among white females (9% increase).
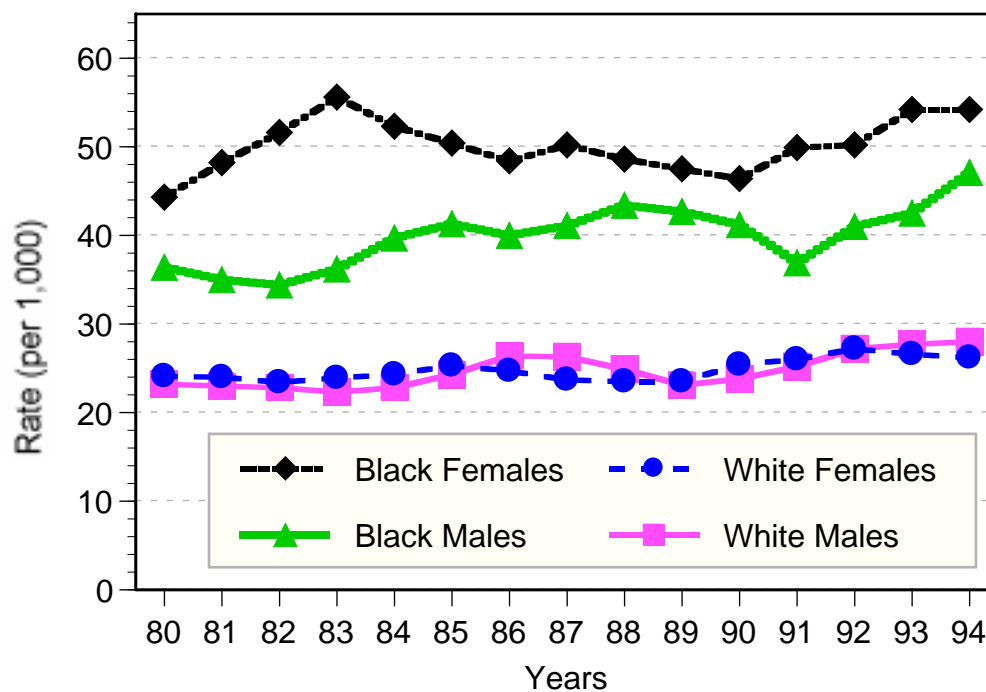
The age-specific prevalence of diabetes in 1992-1994 increased with age until age >75 years (Figure 2.4). Prevalence was higher for blacks than for whites in each of the age groups, and the prevalence of diabetes was highest for black females for all age groups except ages 65-74. Between 1980 and 1994, the largest increase in age-specific prevalence, an increase of 34%, was seen in those aged <45 years (Table 2.8).

Age-adjusted prevalence of diagnosed diabetes among adults in 1994 varied by state and, in general, was lowest in the western states (Figure 2.5; Tables 2.17). Mississippi had the highest age-adjusted prevalence among adults (6.0%), nearly twice the prevalence in Montana (3.1%) which was the lowest prevalence.

The incidence of diabetes increased in the early 1980s, leveled off in the middle of the decade, and then increased sharply in the 1990s (Figure 2.7; Table 2.23). In 1994, the age-adjusted incidence of diabetes (3.51 per 1,000 population) was 49% higher
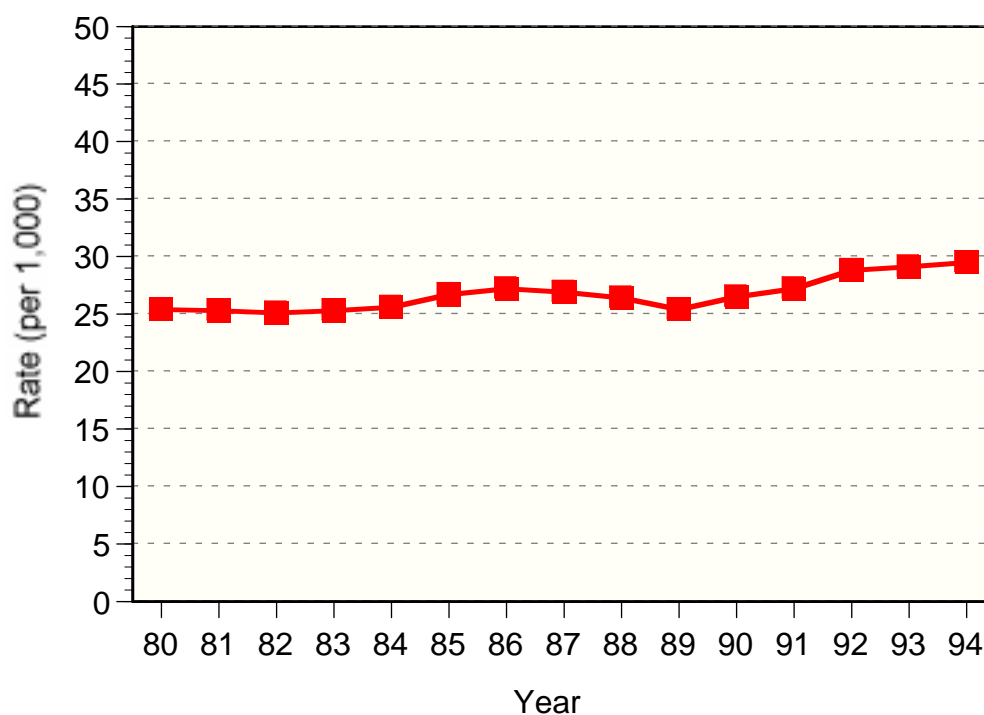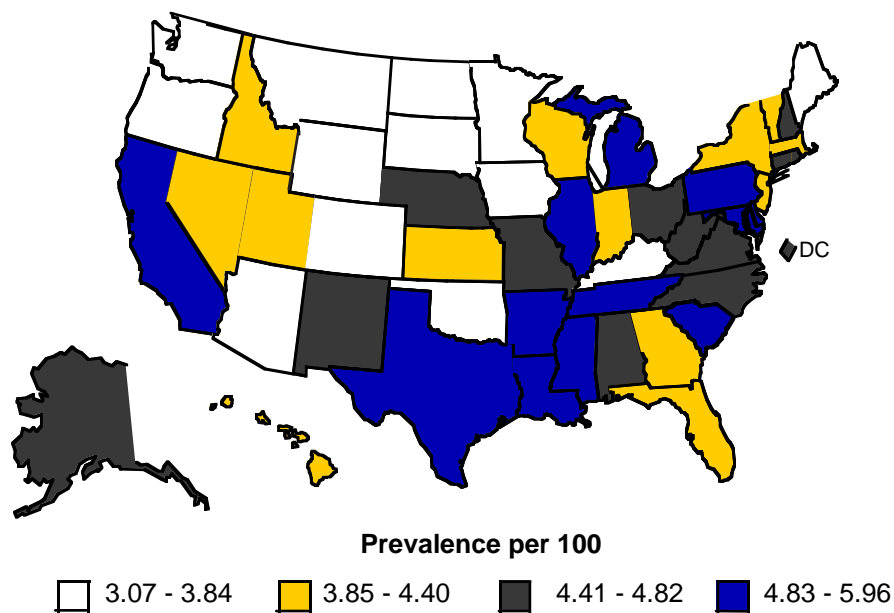

Figure 2.2: Age-standardized Prevalence of Diagnosed Diabetes, by Year, United States, 1980-1994.

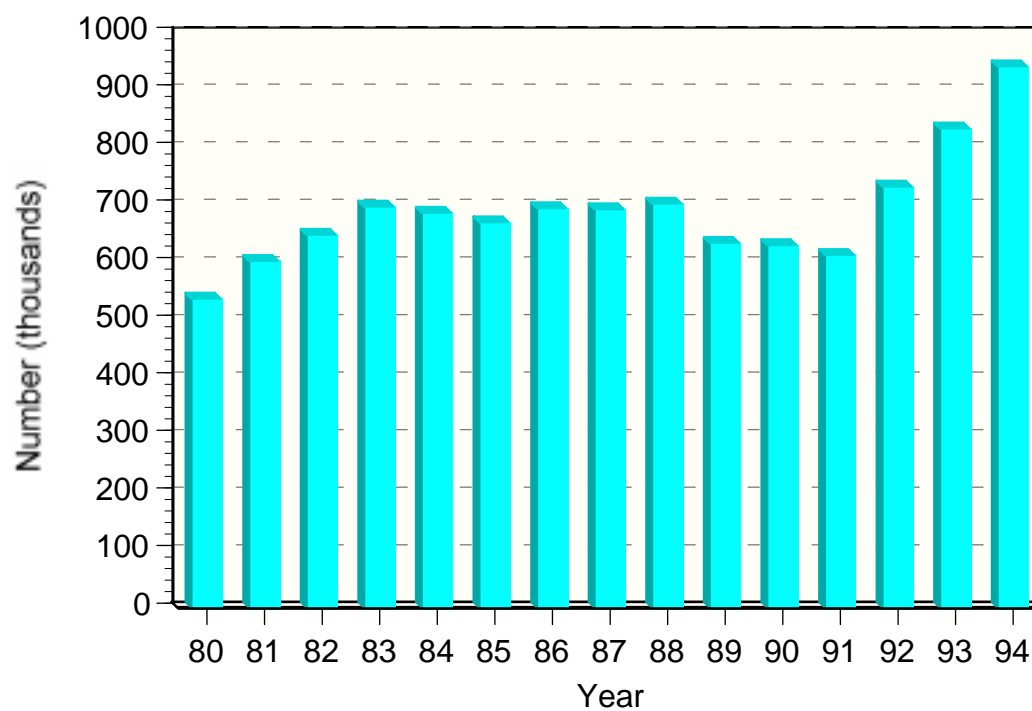**Figure 2.3: Age-standardized Prevalence of Diagnosed Diabetes, By Race and Sex, United States, 1980-1994.**
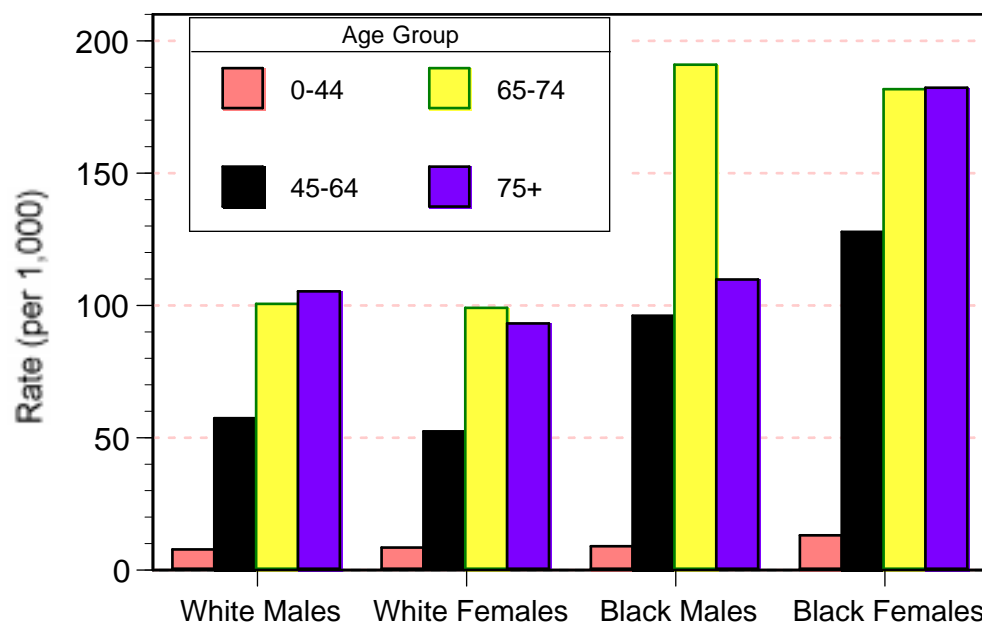
Figure 2.4: Age-specific Prevalence of Diagnosed Diabetes, By Race and Sex, United States, 1992-1994.

Prevalence per 100

☐ 3.07 - 3.84   ☐ 3.85 - 4.40   ☐ 4.41 - 4.82   ☐ 4.83 - 5.96

Figure 2.5: Age-standardized Prevalence of Diagnosed Diabetes per 100 Adult Population By State, United States, 1994.

than the incidence in 1980 (2.36 per 1,000 population). In the 1990s, the number of new cases of diabetes averaged 748,000 per year (Figure 2.6; Table 2.18). With these cross-sectional data, it is impossible to determine whether this increased incidence is due to a true increase in disease incidence, increased case ascertainment, or a combination of these factors.

Figure 2.6: Number of New Cases of Diagnosed Diabetes, United States, 1980-1994.
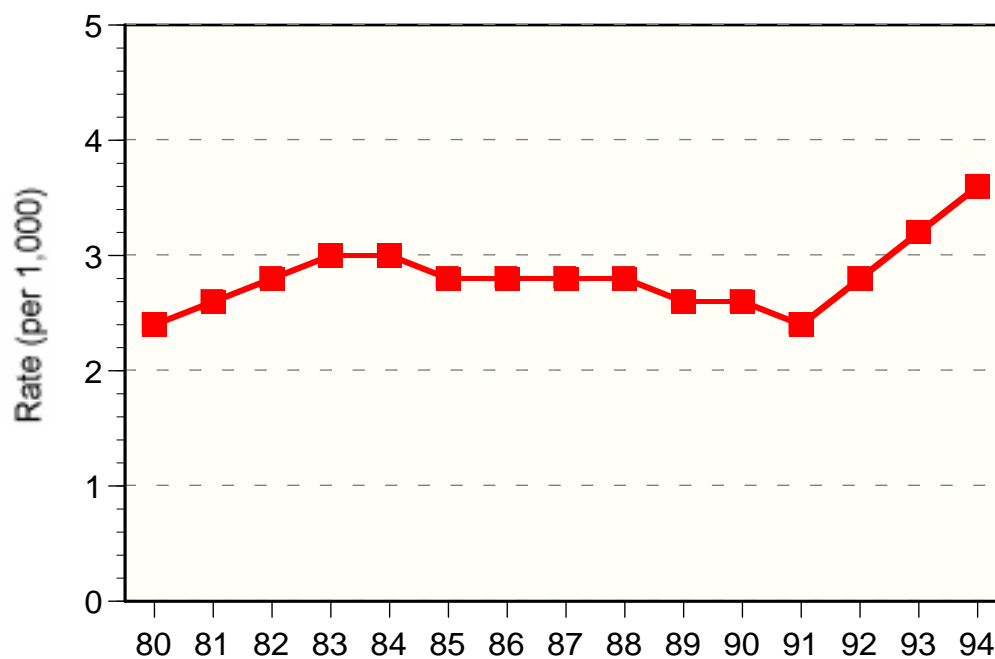
Figure 2.7: Age-standardized Incidence of Diagnosed Diabetes, United States, 1980-1994.

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