

# DIABETES

### What is Diabetes?

Diabetes is considered to be a metabolic disorder. Most of the food we eat is broken down into glucose, which is the fuel for the body.

The job of the Pancreas, a large gland located behind the stomach, is to produce the amount of insulin needed for the body to process the glucose. Unfortunately, in diabetics, the pancreas produces either too little, or no insulin; the glucose level in the blood rises, it spills into the urine, and is thus not available to the body as fuel.



By Donald V. Victorson, CLU

### What Are the Types of Diabetes?

- **Type 1 Diabetes:** An autoimmune disease. The body's immune system attacks and destroys the insulin producing cells in the pancreas. Type 1 Diabetics (5 to 10% of diagnosed diabetics) must take Insulin daily to survive. While type 1 Diabetes can appear at any age, it is most commonly discovered in children and young adults.
- **Type 2 Diabetes:** Most commonly develops in adults age 40 and older who are overweight, have elevated blood pressure, and high levels of blood lipids. The pancreas is usually producing adequate insulin but the body develops insulin resistance, preventing the body from utilizing the insulin effectively. Again, glucose builds up in the blood, but the body cannot properly make use of it as fuel. Type 2 Diabetes usually develops gradually. Symptoms include fatigue, nausea, frequent urination, unusual thirst, weight loss, blurred vision, frequent infections, and slow healing of wounds.
- **Gestational Diabetes:** Develops during pregnancy. Although it frequently disappears after delivery, the mother is at increased risk of developing Type 2 Diabetes later in life.

### More About the Disease

Prior to the discovery of Insulin in 1921, Type 1 Diabetes was a death sentence.

Diabetes is one of the leading causes of death today, contributing to the deaths of over 200,000 Americans every year.

Diabetes frequently leads to heart and circulatory disease, blindness, stroke, kidney failure, amputations, and nerve damage. It also complicates pregnancy, and is known to cause birth defects.

Americans today are increasingly overweight and sedentary. As a result, the incidence of diabetes is rapidly approaching 10% of the population.

### How is Diabetes Managed?

A diabetic must constantly monitor their blood sugar level, utilizing insulin by injection, or oral medication, and/or diet and exercise to control their blood sugar level.

Hypoglycemia, when blood sugar drops too low can make a diabetic nervous, shaky, confused, and can even cause them to faint.

Hyperglycemia, when blood sugar levels become elevated can cause similar symptoms.

Diabetics must recognize that they have a disease, one that can be controlled but never cured. They must work with their physician, and learn to monitor their blood sugar level closely for the rest of their lives, or at least until such time as the transplantation of the pancreas or insulin producing beta cells becomes commonly available therapy.

In order to evaluate the prospect's insurability you need to ask the following important questions:

#### *When Was The Diabetes First Diagnosed?*

How old was the client when the diabetes was first diagnosed?

#### *How long has he had the Diabetes? How well controlled is it?*

The younger the client was when first diagnosed with diabetes, the longer he has had the disease, the poorer the degree of control of blood sugar level, the more difficult the underwriting is going to be, and more costly insurance is likely to be, if available at all.

#### *What Medications Are Currently Being Taken?*

Diabetics may be Insulin Dependent, may be taking oral medications, or both. They may also be taking medication for high blood pressure, and/or hyperlipidemia (elevated cholesterol). Be sure to obtain the names and daily dosages of all medications being taken for any reason.

#### *Is There Any History of Hypertension?*

Many diabetics also have high blood pressure. If well con-

trolled with medication, diet, and exercise this should not be a negative factor in underwriting. If poorly controlled however, high blood pressure in a diabetic can contribute to damage to the heart, kidney, and brain.

*Is There Any History of Coronary or Heart Disease?*

Diabetes doubles the risk of heart disease, which is the Number One cause of death for all diabetics, whether insulin dependent or not.

*Does the client currently smoke?*

Smoking is a major risk factor for heart disease and one that can have a major impact on life expectancy. The good news is that clients who have quit smoking have much better survival rates and accordingly can expect a more favorable offer for life insurance.

*Is There Any History of Kidney Disease?*

The Number Two cause of death for all diabetics is renal failure. A kidney damaged by diabetes begins to leak protein, therefore a diabetic who is spilling protein is likely to be declined or severely rated.

*How Well is the Diabetes Being Controlled?*


Has the Diabetes just recently been discovered? Has the Diabetic accepted that he is a Diabetic, and is he cooperating with the doctor in the control of his disease? Has the medication stabilized the blood sugar level adequately, or is the physician still adjusting the dosage?

If not yet well controlled, we strongly recommend that you postpone applying for insurance, at least until the physician has been able to stabilize the disease for several months. Underwriters do not look kindly upon uncontrolled diabetics.

**Prognosis**

In years to come, more and more Overweight, Sedentary Couch Potatoes are going to develop Diabetes, conse-

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quently they are going to experience difficulty obtaining affordable life insurance.

Medical science has come a long way, however with diabetes. Prevention, sensible diet and exercise seem to be the best possible medicine.

Well-controlled, adult onset diabetics can usually be insured at reasonable

rates.

Frequently with onset after age 50 they can be offered Standard.

Unfortunately, juvenile diabetics are more difficult and therefore more costly to insure.

Uncontrolled Diabetics will usually be postponed, if not declined.❖