Key Facts on Women and Diabetes

Over 246 million people worldwide suffer from diabetes, 122 million of whom are women. This number is expected to rise to 192 million by the year 2025. While the ratio of men-to-women afflicted with diabetes is roughly equal, women are uniquely, and often more severely, affected by the complications of diabetes.

PREVALENCE & MORTALITY

• The diabetes epidemic is growing most rapidly in developing nations, and particularly in South Asian countries, including India and Bangladesh.

• In developed nations, minorities are at the highest risk for developing diabetes and subsequent complications. In the United States, prevalence is two to four times higher among minority populations.

COMPLICATIONS & COMORBIDITY

• The risk of death from coronary heart disease is 50% higher for women with diabetes compared to men with diabetes, a statistic that increases dramatically if the woman is also a smoker.

• Diabetes doubles the risk of mortality for both men and women with peripheral arterial disease.

• The risk of diabetic ketoacidosis (DKA), or diabetic coma, is 50% higher among women than men.

• Women with diabetes experience sexual dysfunction, such as a significant decrease in vaginal lubrication, sexual desire, and orgasm, and increases dyspareunia.

• The odds of developing depression are consistently and significantly higher in women with diabetes than in men.

• Diabetes accounts for 44% of new cases of kidney failure in the United States.

DIABETES & PREGNANCY

• The prevalence of diabetes during pregnancy is as high as 30% among high-risk populations.

• During pregnancy, women with diabetes have a higher risk of vascular complications. Pre-existing vascular complications may also worsen.

• Retinopathy (damage to the retina) does worsen during the course of pregnancy. Diabetic retinopathy may also worsen for weeks following the pregnancy.

• Women with gestational diabetes mellitus (GDM) are 40% to 60% more likely to develop diabetes in the 5-10 years following their pregnancy.

• Recent randomized controlled studies have proven that not treating GDM is associated with poor pregnancy outcome.

• It is expected that the HAPO study will potentially provide a lower threshold to define GDM and will set a new worldwide accepted criteria for both GDM screening and diagnosis.

• Women with GDM are at greater risk of delivering high-birth weight babies (macrosomia), which also may result in greater risk of fistula, hemorrhaging, infection, and possible death.

• Undiagnosed and untreated diabetes during pregnancy may also severely compromise fetal development, and may lead to congenital malformation, still birth, and intrauterine death.

DIABETES & EYE CARE

• Diabetes poses an increased risk for the formation of cataracts. Increased glucose levels also lead to increased risk of cortical cataract.

• Men and women with diabetes are 60% more likely to develop cataracts and 40% more likely to suffer from glaucoma than those without diabetes.

• Diabetes is the leading cause of new cases of blindness among adults 20-74 years old in the United States, causing 12,000-24,000 cases of new blindness every year.
TREATMENT & CARE
- Diabetes screening for pregnant women in resource-poor countries is often unavailable, eliminating the possibility of access to care and treatment.
- Women with diabetes are routinely offered less-aggressive treatment and interventions for comorbid symptoms than men.\(^{19}\)
- In many developing nations, women in traditional families are often denied medical care if the physician is male, even if their situation is life-threatening.\(^{20}\)

SOCIAL & CULTURAL CONSIDERATIONS
- A woman is often the primary family caregiver, assuming the responsibility of a family member’s disease management.
- Women demonstrate higher social involvement in rural, developing communities. Their shared cultural knowledge regarding diabetes care is much higher than men, whether or not they suffer from diabetes.\(^{21}\)
- Women with diabetes can be faced with the stigma of being considered undesirable mates, and will often be rejected as wives due to the disease.\(^{22}\)

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9 Ibid.
10 "Diabetes, Women, & Development." GAWH Expert Meeting Summary. 2008: 3