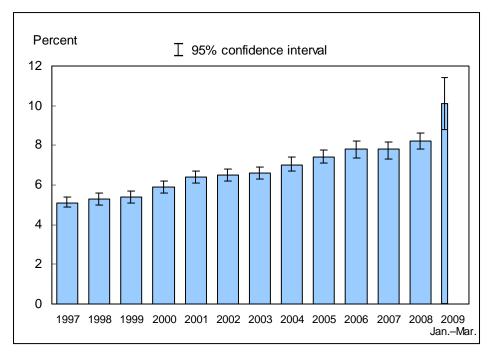


Figure 14.1. Prevalence of diagnosed diabetes among adults aged 18 years and over: United States, 1997–March 2009

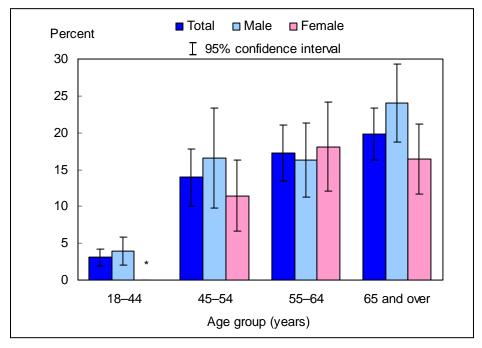


NOTES: Prevalence of diagnosed diabetes is based on self-report of ever having been diagnosed with diabetes by a doctor or other health professional. Persons reporting "borderline" diabetes status and women reporting diabetes only during pregnancy were not coded as having diabetes in the analyses. The analyses excluded persons with unknown diabetes status (about 0.1% of respondents each year). Beginning with the 2003 data, the National Health Interview Survey transitioned to weights derived from the 2000 census. In this Early Release, estimates for 2000–2002 were recalculated using weights derived from the 2000 census. See "About This Early Release" for more details. Estimates for January–March 2009 are based on approximately half the usual quarterly sample. Estimates based on this smaller sample size for the first quarter have larger variances, making it more difficult to detect significant differences between estimates. Observed changes between the last two data points should be reevaluated when the next quarter of data becomes available.

- In early 2009, 10.1% (95% confidence interval = 8.79%–11.43%) of adults aged 18 years and over had ever been diagnosed as having diabetes, which was higher than the 2008 estimate of 8.2%.
- From 1997 through early 2009, there was an increasing trend in the annual prevalence of diagnosed diabetes among adults aged 18 years and over, from 5.1% in 1997 to 10.1% in early 2009.



Figure 14.2. Prevalence of diagnosed diabetes among adults aged 18 years and over, by age group and sex: United States, January–March 2009



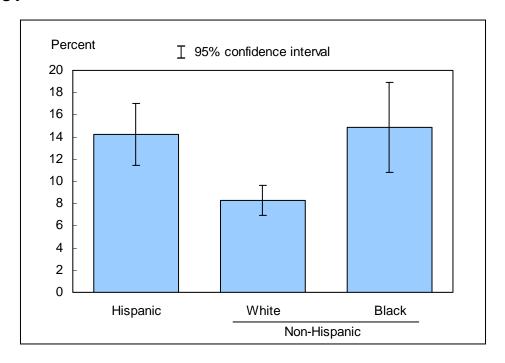
^{*}Estimate does not meet standards of reliability or precision.

NOTES: Prevalence of diagnosed diabetes is based on self-report of ever having been diagnosed with diabetes by a doctor or other health professional. Persons reporting "borderline" diabetes status and women reporting diabetes only during pregnancy were not coded as having diabetes in the analyses. Estimates are based on approximately half the usual quarterly sample. Estimates based on this smaller sample size for the first quarter have larger variances, making it more difficult to detect significant differences between estimates. Observed changes between data points should be reevaluated when the next quarter of data becomes available. The analyses excluded 1 persons (0.0%) with unknown diabetes status.

- For both sexes combined, the prevalence of diagnosed diabetes increased with age. Adults aged 65 years and over (19.8%) were more than six times as likely as adults aged 18–44 (3.1%) to have diagnosed diabetes.
- For adults aged 65 years and over, the prevalence of diagnosed diabetes was higher for men than for women.



Figure 14.3. Age-sex-adjusted prevalence of diagnosed diabetes among adults aged 18 years and over, by race/ethnicity: United States, January–March 2009



NOTES: Prevalence of diagnosed diabetes is based on self-report of ever having been diagnosed with diabetes by a doctor or other health professional. Persons reporting "borderline" diabetes status and women reporting diabetes only during pregnancy were not coded as having diabetes in the analyses. Estimates are based on approximately half the usual quarterly sample. Estimates based on this smaller sample size for the first quarter have larger variances, making it more difficult to detect significant differences between estimates. Observed changes between data points should be reevaluated when the next quarter of data becomes available. The analyses excluded 1 persons (0.0%) with unknown diabetes status. Estimates are age-sex adjusted using the projected 2000 U.S. population as the standard population and using four age groups: 18–44 years, 45–54 years, 55–64 years, and 65 years and over.

- The age-sex-adjusted prevalence of diagnosed diabetes was 14.3% for Hispanic persons, 8.3% for non-Hispanic white persons, and 14.9% for non-Hispanic black persons.
- The prevalence of diagnosed diabetes was higher among non-Hispanic black persons and Hispanic persons than among non-Hispanic white persons.



Data tables for Figures 14.1–14.3:

Data table for Figure 14.1. Prevalence of diagnosed diabetes among adults aged 18 years and over: United States, 1997–March 2009

Year	Crude ¹ percent (95% confidence interval)	Age-adjusted ² percent (95% confidence interval)
1997	5.1 (4.9-5.4)	5.3 (5.1-5.6)
1998	5.3 (5.0-5.6)	5.4 (5.1-5.7)
1999	5.4 (5.1-5.7)	5.5 (5.2-5.8)
2000	5.9 (5.6-6.2)	6.0 (5.7-6.3)
2001	6.4 (6.1-6.7)	6.4 (6.1-6.7)
2002	6.5 (6.2-6.8)	6.5 (6.2-6.8)
2003	6.6 (6.3-6.9)	6.5 (6.2-6.9)
2004	7.0 (6.7-7.4)	6.9 (6.6-7.3)
2005	7.4 (7.10-7.78)	7.3 (6.95-7.57)
2006	7.8 (7.35-8.20)	7.6 (7.15-7.96)
2007	7.8 (7.33-8.18)	7.5 (7.08-7.87)
2008	8.2 (7.81-8.64)	7.8 (7.43-8.19)
January–March 2009	10.1 (8.79-11.43)	9.5 (8.38-10.72)

¹Crude estimates are presented in the figure.

NOTES: Beginning with the 2003 data, the National Health Interview Survey transitioned to weights derived from the 2000 census. In this Early Release, estimates for 2000–2002 were recalculated using weights derived from the 2000 census. See "About This Early Release" for more details. Estimates for January–March 2009 are based on approximately half of the usual quarterly sample. Estimates based on this smaller sample size for the first quarter have larger variances, making it more difficult to detect significant differences between estimates. Observed changes between the last two data points should be reevaluated when the next quarter of data becomes available.

²Estimates are age adjusted using the projected 2000 U.S. population as the standard population and using four age groups: 18–44 years, 45–54 years, 55–64 years, and 65 years and over.



Data table for Figure 14.2. Prevalence of diagnosed diabetes among adults aged 18 years and over, by age group and sex: United States, January–March 2009

Age and sex	Percent	95% confidence interval
18-44 years, total	3.1	1.89-4.24
18-44 years, male	3.9	1.97-5.84
18-44 years, female	*	*
45-54 years, total	13.9	10.07-17.77
45-54 years, male	16.6	9.81-23.30
45-54 years, female	11.4	6.61-16.28
55-64 years, total	17.3	13.44-21.09
55-64 years, male	16.3	11.32-21.36
55-64 years, female	18.1	12.09-24.14
65 years and over, total	19.8	16.25-23.29
65 years and over, male	24.0	18.72-29.34
65 years and over, female	16.4	11.71-21.17
18 years and over (crude ¹), total	10.1	8.79-11.43
18 years and over (crude ¹), male	11.3	9.21-13.36
18 years and over (crude ¹), female	9.0	7.29-10.73
18 years and over (age-adjusted ²), total	9.5	8.38-10.72
18 years and over (age-adjusted ²), male	11.1	9.19-13.00
18 years and over (age-adjusted ²), female	8.2	6.69-9.68

^{*}Estimate does not meet standards of reliability or precision.

NOTES: Estimates are based on approximately half of the usual quarterly sample. Estimates based on this smaller sample size for the first quarter have larger variances, making it more difficult to detect significant differences between estimates. Observed changes between data points should be reevaluated when the next quarter of data becomes available.

¹Crude estimates are presented in the figure.

²Estimates are age adjusted using the projected 2000 U.S. population as the standard population and using four age groups: 18–44 years, 45–54 years, 55–64 years, and 65 years and over.



Data table for Figure 14.3. Age-sex-adjusted prevalence of diagnosed diabetes among adults aged 18 years and over, by race/ethnicity: United States, January–March 2009

Race/ethnicity	Percent ¹	95% confidence interval
Hispanic or Latino	14.3	11.46-17.06
Not Hispanic or Latino, single race, white	8.3	6.93-9.67
Not Hispanic or Latino, single race, black	14.9	10.84-18.93

¹Estimates are age-sex adjusted using the projected 2000 U.S. population as the standard population and using four age groups: 18–44 years, 45–54 years, 55–64 years, and 65 years and over.

NOTES: Estimates are based on approximately half of the usual quarterly sample. Estimates based on this smaller sample size for the first quarter have larger variances, making it more difficult to detect significant differences between estimates. Observed changes between data points should be reevaluated when the next quarter of data becomes available.