



sugar blues

DIABETES
AFFECTS MUCH
MORE THAN
YOUR DIET. AND
WHAT YOU DON'T
KNOW ABOUT
THE DISEASE
COULD KILL YOU.

JOHN LABBÉ

BY **KEISHA GAYE ANDERSON**
PHOTOGRAPHS BY DEBRA DEBOISE

FOR THE BETTER PART OF HIS 20s, KEVIN A. PEMBERTON SPENT five days a week in the gym and had the six-pack and bulging biceps to prove it. To all who knew him, he was the best example of health. But when a doctor's visit a year ago revealed that he had Type II diabetes, it completely reshaped his understanding of the disease and who gets it.

"I remember going to the doctor to check my blood pressure," says the 33-year-old Harvard grad who always maintained regular physicals, "and the sleeve could not get above the elbow." He laughs as he reminisces about the days when his aggressive workout routine resulted in a bulky physique. Pemberton was working as a corporate compliance associate at Putnam Investments in Boston when he started feeling lethargic, no matter how much he worked out. "I was getting headaches from time to

say, 'Look at your lifestyle,'" explains Pemberton, who agreed, thinking his blurry vision might be the result of long hours spent on the computer.

But as he experienced additional symptoms he became concerned. "In one sitting, I ate an entire pizza pie and then I had a liter of Coca-Cola. And I still felt hungry." He was also constantly thirsty. Then, on a three and a half hour Amtrak ride home from Boston to New York, he got up to urinate at least ten times.

symptoms, Pemberton didn't think someone in good shape could have diabetes. He thought it only plagued the elderly and obese. Nevertheless, he decided to get a doctor's opinion.

The doctors immediately tested his blood glucose levels with an A1C test—a test that measures blood sugar levels over the past two to three months by measuring the amount of glucose that sticks to red blood cells. His A1C result was over 11 (6.5 and below is healthy) and his glucose level was between 600 and 700 (normal is in the low to mid 100s).

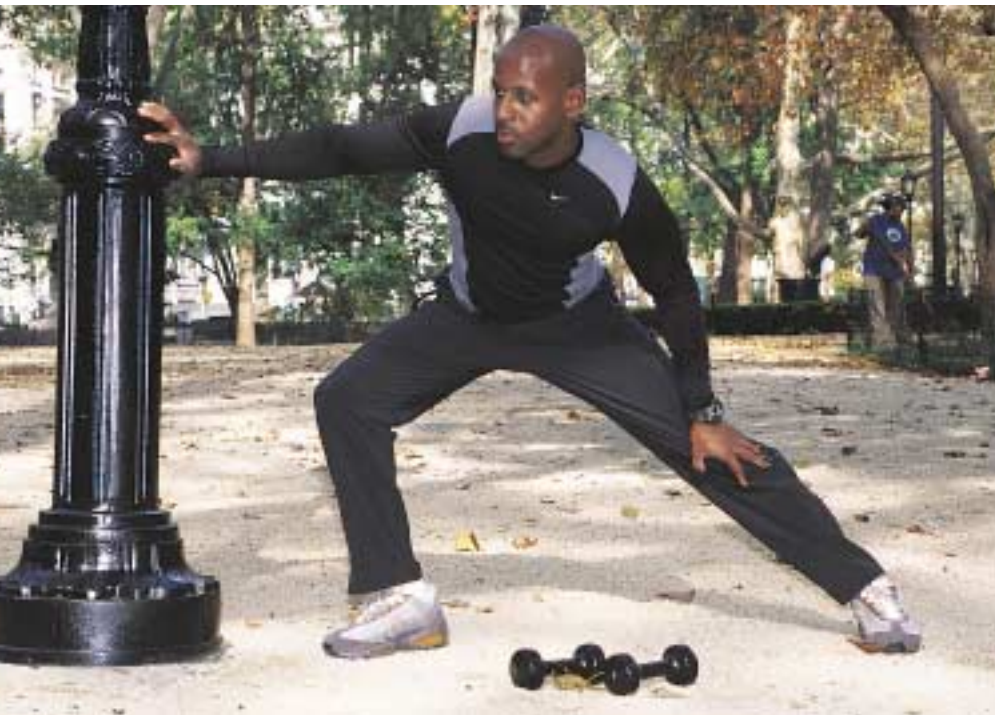
Doctors feared that Pemberton was at risk for falling into a diabetic coma. "They gave me a shot of insulin in my stomach and I felt relieved, head and shoulders above what I'd felt like the [previous] three to four months," says Pemberton, who spent that night in a hospital emergency room.

"When I was diagnosed, I went to my doctor and [said], 'I don't understand, how is this possible? [I thought] you would have to be obese.' He said that that's not the case, particularly with Type II diabetes."

Type II diabetes mellitus is also known as adult-onset diabetes or non-insulin-dependent diabetes mellitus. It occurs when the pancreas doesn't produce sufficient amounts of insulin (a hormone that regulates the amount of sugar in the blood), or when the body doesn't use the insulin the pancreas produces, resulting in a raised blood sugar level. The effect diabetes can have on the body can be disastrous. They range from damaged nerves and blood vessels; retinopathy (a disease of the retina that can cause blindness); kidney failure; a hardening of the arteries, which can lead to stroke; and poor circulation in the legs and feet, which can lead to ulcers, infections, and eventual amputation. Diabetes can also lead to coma and death.

The good news is, with diet and exercise, Type II diabetes is manageable, and people with the disease can live long, healthy lives. The bad news is that African Americans and Hispanics suffer disproportionately from this disease, and the numbers

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time and I said to my doctor, 'I just don't feel well,'" he recalls. He also began experiencing blurry vision in his left eye and was fighting bouts of fatigue. His doctor insisted that he was just working too hard. "They'd

Pemberton really began to worry. His urges to use the bathroom had become so persistent, they were interrupting his sleep pattern.

Although a coworker suggested that he was experiencing diabetic

are growing. There are presently 2.8 million African Americans living with diabetes—13% of the population. Diabetes among blacks has quadrupled over the last 30 years.

Of those with Type II diabetes, 90% are obese, a condition where there is too much fat in the body. Body fat is measured via Body Mass Index (BMI cutpoints), a number calculated from your height and weight. Cutpoints at 30 and up indicate obesity, which is more than just being overweight. Obesity is a growing problem in the black community. “Certainly there is a genetic component to diabetes though we’re not exactly sure which genes are responsible,” says Dr. David P. Pryor, founder and president of BlackWomensHealth.com, and the associate medical director of Well-Point Health Networks in California. “It is clear, however, that anyone who has a blood relative with diabetes is at risk for developing the disease.”

Kevin Pemberton only learned that his father had diabetes after he was diagnosed. It was not something they discussed. “One of the big things I encourage young, black people to do is know your family history and talk about it,” he says. Because of his illness, he has encouraged his twin brother and two younger brothers to get tested. His mother has since changed her cooking and eating habits as well.

Pemberton, who says he had a tremendous sweet tooth, is no longer eating the sausage, eggs, bread, two doughnuts, and coffee he used to eat for breakfast. “Everyday I was really piling on food and there were no vegetables,” he says.

There are social and economic factors that contribute to diabetes and other African American health concerns. “We don’t have many tennis courts and parks [in our communities]. And many of our grocery stores don’t carry fresh fruit. Instead we have all these fast food restaurants,” says Dr. Lenore T. Coleman, a clinical pharmacist who is a certified diabetes educator in Virginia. She is also the creator of [\[brownsugar.com\]\(http://brownsugar.com\) and co-author of *Healing Our Village: A Self-Care Guide to Diabetes Control* \(\\$15.95; Healing Our Village Publications\). Coleman adds that with so many black women single-parenting and providing elder care as well, carving out time for health issues can be very difficult. Coleman, who holds regular diabetes education programs at black churches and conventions, notes that even when people know about their risk factors, they are still slow to change their habits.](http://www.blackand</p>
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“We have a pretty fatalistic view of life,” says Dr. Coleman. “We have given up control. We’re into this mode of ‘What will be, will be.’ I hear that a lot.”

But making lifestyle changes early—long before your 30s and 40s—can be the difference between life and death. Dr. Pryor suggests getting screened for diabetes at age 30 if you are overweight, African American, have a blood relative with diabetes or any combination of the above. “If you are diagnosed with diabetes [you have to] become very active in your care. The worst thing you can do is ignore it because, over time, it can cause a number of significant problems,” he says. He notes there are several medications on the market to help control Type II diabetes, such as sulfonylureas, which help the pancreas produce more insulin; biguanides, which lessens the amount of glucose the liver produces; and thiazolidinediones, which helps make blood cells more receptive to insulin. “It’s not a death sentence to get diagnosed with diabetes. It’s really a time to take action,” says Dr. Pryor.

Today Pemberton is a mutual fund analyst with Citigroup and is in good health. He has slimmed down but is content with his new physique and diet. When he was first diagnosed, he consulted dieticians at the Joslin Diabetes Center (www.joslinresearch.org) in Massachusetts to better handle his new lifestyle. He was surprised and relieved to learn that there were others like him. He’s grateful for having learned his lesson early. It’s one that has saved his life. **BE**



More Information on Diabetes

Diabetic Symptoms*:

- Frequent urination
- Excessive thirst
- Unexplained weight loss
- Extreme hunger
- Sudden vision changes
- Tingling or numbness in hands or feet
- Feeling very tired much of the time
- Very dry skin
- Sores that are slow to heal

Helpful Resources:

■ **The National Diabetes Education Program** works at the state and local level delivering information about and providing services for African Americans living with diabetes. The program is sponsored by the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health. Get more information by calling 877-CDC-DIAB (877-232-3422), or by visiting www.cdc.gov/diabetes/index.htm.

■ **Black&BrownSugar.com** provides accurate, up-to-date information on the care and management of diabetes. The site is for health care providers and those in the minority community living with the disease.

■ Consumer members of the **American Diabetes Association** receive information on the association’s activities and programs; the latest technology and news; discounts on ADA cookbooks, meal planners, and lifestyle guides; an annual resource guide to diabetes supplies; and a monthly subscription to *Diabetes Forecast* magazine, which contains research, treatments, and tips for day-to-day coping with the disease. To purchase the \$28 annual membership, visit the ADA at www.diabetes.org, or call 800-DIABETES (800-342-2383).

*SOURCE: CENTERS FOR DISEASE CONTROL AND PREVENTION