

## **Diabetes Mellitus Related Morbidity, Risk of Hospitalization and Disability**

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### **ABSTRACT**

**Objective.**—To investigate the rates of complications, hospitalizations and disabilities attributable to type 1 and type 2 diabetes mellitus (DM) combined, unless otherwise noted.

**Methodology.**—Risk assessment of DM-related morbidity, hospitalizations and disabilities using data from the medical literature and health statistics on the population. Calculation of morbidity, hospitalization, and disability ratios (MbR, HR, DR) will allow comparison of observed rates in people with DM to those reported in the nondiabetic population.

**Results.**—MbRs vary according to the morbid condition studied: = 300% at age 45–64 years for ischemic heart disease, 533% for coronary heart disease or stroke, 226% to 388% for chronic heart failure, 560% for peripheral vascular disease, 380% for neuropathy at age 35–74 years, 890% to 2225% for lower limb amputations, 1458% to 3287% for end-stage renal disease. For ocular complications: cataracts, 165% to 232%; glaucoma 140% to 330%; trouble seeing, 180% to 231%; blindness at age  $\geq$ 65 years, 517%. Higher values are noted at younger ages. HR: 200% to 409%. DR: 217% to 328%.

**Conclusion.**—Among diseases, DM is one of the leading and growing causes of hospital admission and disability. Precise risk assessment of morbidity is essential for realistic underwriting of health and disability insurance.

**Keywords:** Diabetes mellitus, morbidity, disability, hospitalization.