

United States Senate

WASHINGTON, DC 20510

Join Us in Recognizing the Special Diabetes Program: An Effective Program that is Advancing Research and Improving Lives

March 5, 2012

Dear Colleague,

As Co-Chairs of the Senate Diabetes Caucus, we are writing to ask that you join us in recognizing the Special Diabetes Program (SDP), which consists of the Special Diabetes Program for Type 1 Diabetes and the Special Diabetes Program for Indians. The SDP is demonstrating real returns on the federal investment and helping to create a brighter future for Americans burdened by diabetes. The SDP has received overwhelming bipartisan support in the past and must be renewed this year to capitalize on the advances to date and the opportunities that lie ahead.

Diabetes has a significant human and economic toll. In fact, it is the leading cause of kidney disease, blindness in working age adults, and non-traumatic amputations. The risk of heart attack or stroke is increased as well, by two to four times for people with type 2 diabetes and 10 times for people with type 1 diabetes. These figures come at staggering cost: the United States spends \$174 billion on diabetes annually, with one in three Medicare dollars being spent on people with diabetes. Unfortunately, these numbers are expected to nearly triple in the next 25 years.

In spite of these troubling statistics, the SDP is yielding research advances that are helping to better treat, prevent, and lead us closer to a cure for type 1 diabetes. SDP-funded research recently developed a groundbreaking new test that accurately predicts kidney function loss in diabetes patients 10 years in advance, allowing ample time for meaningful preventative steps for kidney health. This is significant, as diabetes is the leading cause of end-stage renal disease (ESRD), which cost \$39.5 billion in public and private spending in 2008.

The SDPI is making a tremendous difference in the health of American Indians and Alaska Natives (AI/AN), whose rate of type 2 diabetes is 2.8 times the national average. SDPI funding has significantly increased the availability of diabetes prevention services and treatment for those with diabetes, leading to remarkable improvements in diabetes care such as: markedly lowered average blood sugar levels, decreased LDL cholesterol, and a 27.7 percent reduction in ESRD cases from 1995 to 2006.

These examples are just a few of the many ways in which the SDP has led to improved health and reduced long-term public and private health care costs. We encourage you to join us in recognizing the importance of the Special Diabetes Program by signing the attached letter. To add your name or for further information, please contact Alison MacDonald with Senator Shaheen (4-2841) or Priscilla Hanley with Senator Collins (4-2523). The deadline to sign on is March 30, 2012.

Sincerely,



Susan M. Collins
U.S. Senator



Jeanne Shaheen
U.S. Senator