

As Adopted by the Senate

133rd General Assembly

Regular Session

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S. C. R. No. 7

Senators Craig, Antonio

**Cosponsors: Senators Thomas, Maharath, Fedor, Sykes, Hackett, Yuko,
Blessing, Burke, Coley, Dolan, Eklund, Gavarone, Hottinger, Huffman, M.,
Johnson, Kunze, Manning, Obhof, O'Brien, Peterson, Roegner, Rulli, Schaffer,
Wilson**

A C O N C U R R E N T R E S O L U T I O N

To urge support of the "Screen at 23" campaign regarding 1
the screening of Asian Americans for type 2 diabetes. 2

**BE IT RESOLVED BY THE SENATE OF THE STATE OF OHIO (THE HOUSE OF
REPRESENTATIVES CONCURRING):**

WHEREAS, Approximately 103,800 Asian Americans in Ohio are 3
expected to have diabetes or prediabetes by 2025, according to 4
the Institute for Alternative Futures; and 5

WHEREAS, The National Center for Health Statistics in the 6
United States Centers for Disease Control and Prevention (CDC) 7
states that diabetes is the fifth leading cause of death among 8
Asian Americans; and 9

WHEREAS, Results from the United States National Interview 10
Survey, 1997 - 2008, show that Asian Americans are over 30% more 11
likely to have diabetes than Caucasian Americans; and 12

WHEREAS, According to researchers at the Joslin Diabetes 13
Center at Harvard University, Asian Americans are also at a 14
greater risk of developing prediabetes, type 2 diabetes, and 15

associated risks (such as cardiovascular disease) at a lower 16
body mass index (BMI) than Caucasians, Hispanics, African- 17
Americans, and Native Americans; and 18

WHEREAS, The Joslin researchers have found that Asian 19
Americans face a health care disparity in type 2 diabetes 20
detection and diagnosis, due in part to general guidelines 21
calling for screening at a BMI of 25 kg/m², which misses 36% of 22
type 2 diabetes diagnoses in Asian Americans, or nearly 6,500 23
Ohioans. These guidelines also cause underestimates of 24
prediabetes prevalence among Asian Americans and the increased 25
risk of both prediabetes and type 2 diabetes among Asian 26
Americans younger than 45 years of age; and 27

WHEREAS, The CDC reports that almost 70% of people with 28
diabetes over age 65 will die of some type of heart disease, and 29
about one in six will die of stroke. People with diabetes can 30
experience very high blood-glucose levels, a condition that 31
causes damage to nerves and blood vessels. This, in turn, puts 32
them at risk for developing end stage renal disease and kidney 33
failure, blindness, and lower limb loss; and 34

WHEREAS, People with diabetes have medical expenses 35
approximately 2.3 times higher than those without diabetes. 36
According to the American Diabetes Association, total direct 37
medical expenses for diagnosed diabetes in Ohio were estimated 38
at \$9 billion in 2017. In addition, another \$3.3 billion was 39
spent on indirect costs from lost productivity due to diabetes; 40
and 41

WHEREAS, Early detection and treatment can mitigate 42
diabetes-related complications, risks, and costs; and 43

WHEREAS, Interventions focused on nutrition, physical 44
activity, and healthy weight loss have been shown to reverse 45
prediabetes, improve glucose function in persons with type 2 46

diabetes, and reduce their need for multiple medications; and 47

WHEREAS, Screening Asian American patients for type 2 48
diabetes at a BMI of 23 kg/m2 instead of 25 kg/m2 would detect 49
over 4,000 cases of this disease, and many thousands more of 50
prediabetes cases in Ohio, and would lead to more screenings of 51
Asian Americans younger than 45 who have a BMI of 23 or more and 52
are at risk for type 2 diabetes. Such efforts are likely to lead 53
to the initiation of treatment or early interventions to reduce 54
negative comorbidities such as heart disease, kidney disease, 55
and limb amputation; and 56

WHEREAS, The National Institutes of Health found that more 57
than half of Asian Americans with type 2 diabetes are 58
undiagnosed, greatly increasing their overall health risk; and 59

WHEREAS, Recent analysis of cross-sectional national data 60
show that Asian Americans are the least likely ethnic group to 61
receive recommended diabetes screening, with a 34% lower rate of 62
diabetes screening than Caucasians; and 63

WHEREAS, The World Health Organization recommends screening 64
Asian patients for type 2 diabetes at a lower BMI than non- 65
Hispanic whites, and the 2015 guidelines of the American 66
Diabetes Association recommend that Asian Americans be tested 67
for type 2 diabetes at a BMI of 23 kg/m2; and 68

WHEREAS, The Asian American, Native Hawaiian, and Pacific 69
Islander Diabetes Coalition has coordinated the "Screen at 23" 70
campaign with support from over 40 national and regional health 71
organizations; and 72

WHEREAS, The State of Ohio has the opportunity to join 73
California, Hawaii, Washington, Illinois, and Massachusetts to 74
become the sixth state to formally recognize and recommend the 75
screening of adult Asian Americans for type 2 diabetes at a BMI 76
of 23 kg/m2, enabling thousands to receive the early care and 77

treatment needed to live healthier, happier lives; now therefore 78
be it 79

RESOLVED, That we, the members of the 133rd General 80
Assembly of the State of Ohio, in adopting this resolution, 81
endorse and support the Screen at 23 campaign's efforts to 82
increase awareness of diabetes among Asian Americans, including 83
the use of appropriate screening measures for Asian American 84
patients, and to eliminate disparities; and be it further 85

RESOLVED, That we, the members of the 133rd General 86
Assembly of the State of Ohio, recommend that the Ohio 87
Department of Health actively encourage, through existing 88
communication protocols and internal mechanisms, all public and 89
private health care providers and facilities to participate in 90
the Screen at 23 campaign efforts; and be it further 91

RESOLVED, That the Clerk of the Senate transmit duly 92
authenticated copies of this resolution to the Governor, the 93
Director of Health, and the news media of Ohio. 94