



## Should Diabetes Screening Vary

Based on Race and Ethnicity?

People from U.S. ethnic minorities might benefit from screening for diabetes at an earlier age and a lower body-mass index threshold.

The 2021 U.S. Preventive Services Task Force (USPSTF) guidelines recommend diabetes screening for adults (age range, 35–70) with body-mass indexes (BMIs)  $\geq 25$  kg/m<sup>2</sup> (NEJM JW Gen Med Sep 15 2021 and JAMA 2021; 326:736). However, minority populations in the U.S. (e.g., Black, Hispanic, Asian) have higher rates of diabetes than do white residents. Using the cross-sectional U.S. National Health and Nutrition Examination Survey data, investigators used statistical modeling to estimate diabetes prevalence of U.S. racial and ethnic groups and to determine equivalent BMI and age thresholds for diabetes screening.

Findings were as follows:

- Prevalence of diabetes in adults (age range, 35–70) was significantly higher among people of Asian, Black, Mexican, or other Hispanic descent than among whites ( $\approx 20\%$  vs.  $12\%$ ).
- To achieve equivalent disease prevalence from screening people with BMIs of 25 kg/m<sup>2</sup>, the age threshold for screening was much lower for Asian, Black, and Hispanic people (age range, 20–25) than for white people (age, 35).
- To achieve equivalent disease prevalence from screening 35-year-old people, BMI thresholds were much lower for Asian, Black, and Hispanic people (BMI range, 18.5–20 kg/m<sup>2</sup>) than for white people (BMI, 25 kg/m<sup>2</sup>).