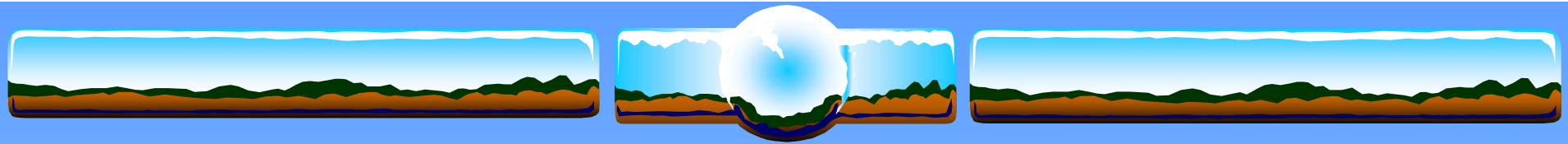


# Diabetes and Kidney Disease project

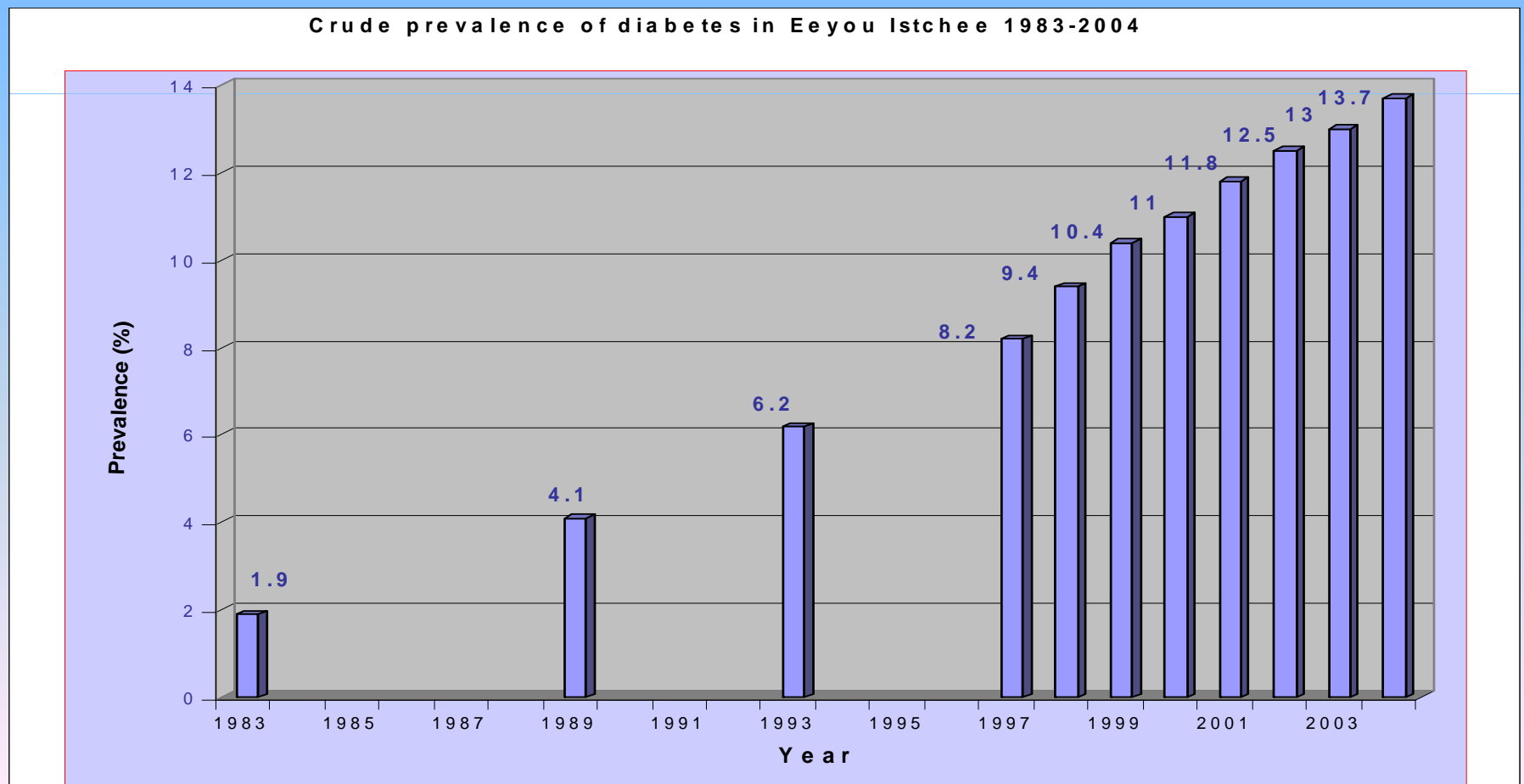
*S. Iqbal, G. Bartlett, D. Dannenbaum,  
M. Vasilevsky, Michael Phillips*

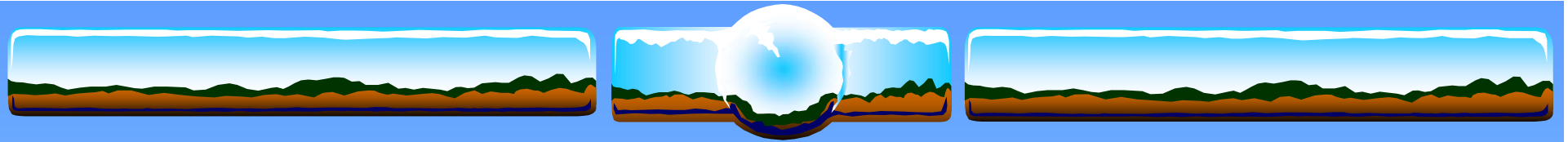
MUHC, McGill University, Cree Health Board



# THE NUMBER OF CREE WITH DIABETES CONTINUES TO INCREASE EVERY YEAR.

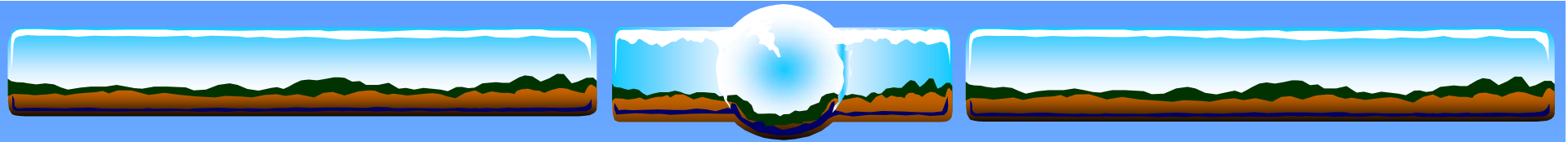
Crude prevalence of diabetes in Eeyou Istchee 1983-2004





## Kidney Disease and Diabetes

- ❖ 50% of Cree have damage to their kidneys from their diabetes (615 Cree).
- ❖ This is the same rate as seen in Pima and other Aboriginal groups,  
but double the rate we  
see in studies in Caucasian groups.

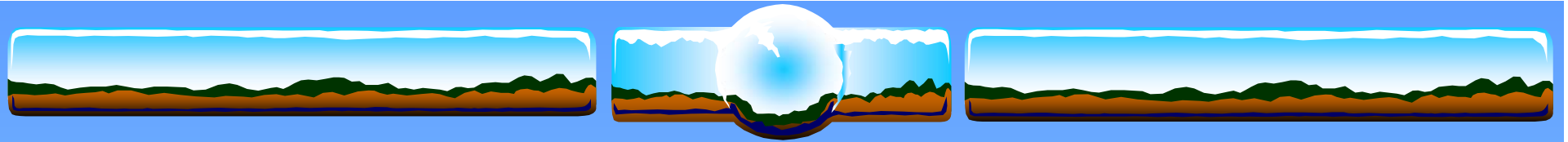


# Kidney Disease and Diabetes

- ❖ For patients on dialysis, the average length of time from the diagnosis of diabetes to starting dialysis in the Cree is 10.4 years.

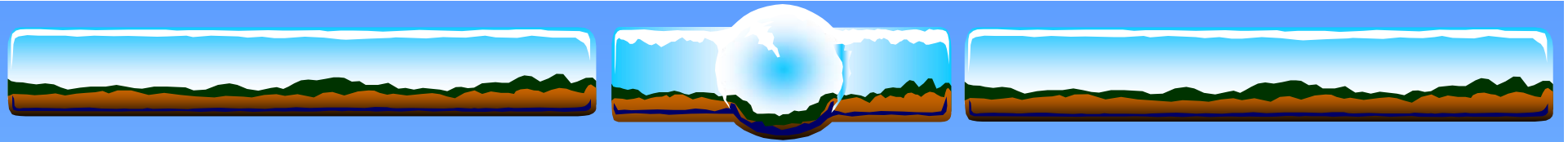
(it is around 20 years for Caucasians)

- ❖ In PIMA indians with diabetes for 20 years  
**15% needed dialysis.**



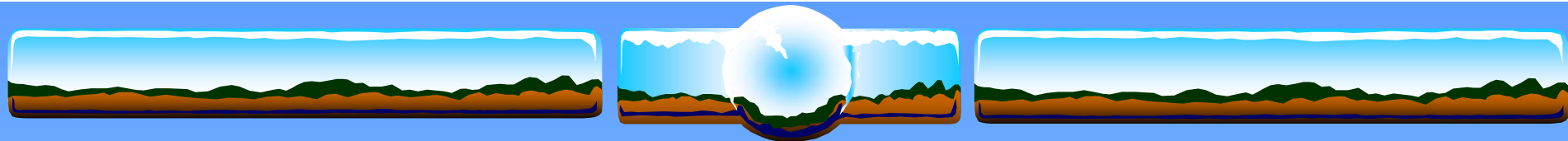
# QUESTIONS

- ❖ We DO NOT know why Aboriginal people have higher risks of kidney damage from diabetes.
- ❖ We also DO NOT know why some people have a worsening of their kidney damage more than other



## What We Propose

- ❖ 1) *IDENTIFY high risk people – genetic or environmental.*
- ❖ 2) *DETERMINE if combination of two specific medications will decrease the risk.*



## First Step: diabetes and kidney disease project

Identify Cree people with kidney disease and diabetes

Identify those who progress faster

Identify those who do not progress

### We will study different factors

Genetic polymorphisms: blood test to identify higher risk people

Environmental: residence/occupation

Blood pressure control

Blood sugar control

Current medications

Family History

Diabetes History

Exercise

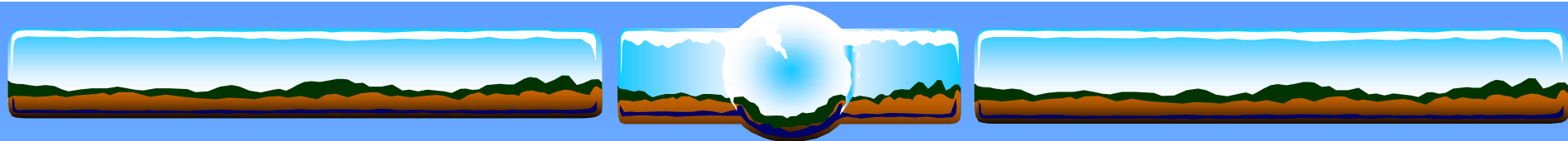
Eating habits



# Support

- ❖ Cree Health Board
- ❖ Chiefs of the Communities
- ❖ Diabetic Clinics and Staff
  
- ❖ FUNDS – CIHR
- ❖ Two to three year commitment





# Kidney Disease and Diabetes

MEEGWITCH

Any questions?

