

# SCREEN AT 23



## **Template to Help Spread “Screen at 23”**

Thank you for joining the Screen at 23 campaign and helping to push this central message:

More than half of Asian Americans with type 2 diabetes, and even more Asian Americans with prediabetes, are undiagnosed. To make treatment, intervention, and even prevention of diabetes possible, we need to first ensure that it is revealed. We need to call for appropriate screening practices for Asian Americans. We need to screen at 23.

What we want physicians and health providers will do: consider testing an Asian American patient who has a BMI of 23 and one or more of the prevalent risk factors for diabetes (i.e., implement the new ADA screening guideline for Asian Americans).

What we want for Asian American patients: be aware that a BMI of 23 (easy to calculate) is a risk factor and to talk to your doctor about it. Patients can calculate their BMI [here](#).

Points to Keep in Mind and/or Post Online:

- *Over half of all Asian Americans with diabetes remain undiagnosed. The number of undiagnosed Asian Americans with prediabetes is even higher. Of these, a significant portion of Asian Americans at risk for diabetes or prediabetes appear to be at a "healthy weight", and aren't being tested.*
- *The general rule for some time has been that if you have a body mass index below 25, you aren't at risk for diabetes. Research on Asian Americans, however, proves different. The American Diabetes Association, National Institutes of Health, and the Centers for Disease Control have all recently acknowledged that Asian Americans should be screened for diabetes at a lower body mass index, and 23 is that number.*
- *23 isn't a redefinition of overweight or obesity, it's a number to keep in mind to get checked by our doctors and live healthier.*
- *BMI can be calculated [HERE: http://aadi.joslin.org/bmi-calculator](http://aadi.joslin.org/bmi-calculator) (Courtesy of the [Asian American Diabetes Initiative](#) at [Joslin Diabetes Center](#))*
- *We need to push the Screen at 23 campaign forward among doctors, patients, and the public at large to help ensure that Asian Americans are Screened at 23. Together we can help uncover thousands of patients with diabetes so they can start getting the treatment they need before complications arise, and help thousands more prevent diabetes outright.*

#### Points to Further Emphasize (target: Health Professionals):

- The "Screen at 23" campaign seeks to reveal the undiagnosed cases of diabetes (more than half, according to the NIH) among Asian Americans. By screening Asian American patients using a body mass index of 23 as per the 2015 ADA recommended guideline, thousands of cases of diabetes [approx 215,000] and even more of pre-diabetes [approx 430,000] will be unmasked.
- An Asian American patient who appears to be at a healthy weight, and is relatively thin, could actually be at risk for developing diabetes. Previously, having a body mass index below 25 would often preclude a patient from being screened - and that's an assumption this campaign seeks to debunk.
- Testing for diabetes at a body mass index (BMI) of 23 is a recommendation of the American Diabetes Association and has been supported by a growing body of research done at the community level. Institutions in government and non-government sectors have begun to take notice, but we need to continue to engage the providers and patients on the importance of screening at 23 so that guidelines are put into practice and policies change.
- Having a body mass index of 23 doesn't mean that an Asian American is "fat", "overweight", or any kind of new definition for obesity. It is a marker to be aware of for both doctors and patients however; one to consider being tested for diabetes and to think about lifestyle changes like nutrition and exercise.
- Since 2011, the AANHPI Diabetes Coalition, a coalition of twenty local and national organizations including the American Diabetes Association, Harvard's Joslin Diabetes Center, and the National Council



of Asian Pacific Islander Physicians, has advocated on the need to have a diabetes screening guideline appropriate for Asian Americans, and to have that guideline implemented widely and at the policy level.

- The ADA's guidance change (going from BMI 25 to 23) for Asian Americans marked a significant milestone in the progress of this issue. But there is still work to be done:
  - ◆ The Centers for Medicare and Medicaid Services (CMS) still uses BMI 30 as the cutpoint to receive reimbursement for obesity counseling services. While it is important to keep in mind that the lower BMI cutpoints for Asian Americans are *markers for risk of developing certain chronic conditions like diabetes* and not redefinitions of overweight and obese, it does raise the issue of there being more lower and more appropriate cutpoints for Asian American patients to receive free counseling that will help to lead healthier lives.
  - ◆ The United States Preventive Services Task Force (USPSTF) is an independent organization of health experts that extensively reviews scientific evidence to make a recommendation for preventives services such as screenings. Unless the USPSTF gives a procedure an "A" or "B" grade



#### Sample Tweets:

1. If you're Asian American and your body mass index is 23 or higher, talk to your doctor about screening for diabetes. [#Screenat23](#)
2. 51% of Asian Americans w/ diabetes are UNDIAGNOSED. What to do? [#Screenat23](#)
3. [#Screenat23](#) is supported by evidence from [@AmDiabetesAssn](#), [@NIH](#), [@CDCgov](#), and [@WHO](#). Learn more here: [www.screenat23.org](http://www.screenat23.org)
4. If you're Asian, calculate your BMI here: <http://www.asianarch.org/bmi/calc/BMICalculator.html>, if 23 or higher, talk to your doc about diabetes screening. [#Screenat23](#)



#### Sample FaceBook posts:

1. The "Screen at 23" campaign seeks to reveal the undiagnosed cases of diabetes (more than half, according to the NIH) among Asian Americans. By screening Asian American patients using a body mass



index of 23 as per the 2015 ADA recommended guideline, thousands of cases of diabetes [approx 215,000] and even more of pre-diabetes [approx 430,000] will be unmasked. ([www.screenat23.org](http://www.screenat23.org))

2. "Screen at 23" seeks to do what it says: get every Asian American patient with a body mass index of 23 or higher screened for diabetes. This requires educating providers who previously might rule out diabetes as a risk factor for an Asian who is "skinny" or "average" in build. It requires educating the public that having a BMI of 23 is not a new definition of "overweight" or "obesity" for Asian Americans, but rather a number to look out for, one that should have individuals thinking about making healthy changes to their diet and incorporating healthy changes to their lifestyle, such as exercising. Above all, the campaign seeks to unmask diabetes and prediabetes in Asian Americans, *more than half of whom are undiagnosed*, according to the National Institutes of Health. Go to [www.Screenat23.org](http://www.Screenat23.org)

### Sample Long Email:

(to active partners and networks, this provides some background context around the guideline and work around diabetes among Asian Americans)

Dear Colleague:

According to the [World Health Organization](#), [American Diabetes Association](#), [National Institutes of Health and the Centers for Disease Control](#), Asian Americans are at risk of developing diabetes at a lower body mass index (BMI) than Whites, Blacks, Hispanics, and Native Americans. The community based participatory research and academic studies done on this small but rapidly growing population have provided the literature that has caused these large institutions to change their recommends for screening diabetes in Asian Americans. The American Diabetes Association's (ADA) latest [2015 Standards of Care in Diabetes](#) included a body mass index of 23 kg/m<sup>2</sup> as a risk factor to consider for testing diabetes in Asian Americans. The former cutpoint for risk being a BMI of 25, one that the researchers have been saying will leave approximately a third of a million Asian American diabetics (and even more prediabetics) undiagnosed.

A small pocket of knowledge has reached a larger stage, but there remains a gap in awareness that, unless filled, will equate to a very slow implementation of these guidelines



among providers. The Asian American, Native Hawaiian, and Pacific Islander Diabetes Coalition was formed in 2011 by a combination of these same researchers along with community and public health leaders, endocrinologists, diabetes educators, dieticians, and providers. Its objective has been to move the scientific knowledge of diabetes among Asian Americans, moving the science into guidelines for diagnosis. Now, the goal is to take this guideline and make sure it is implemented.

## Goal

*Screen at 23.* seeks to do what it says: get every Asian American patient with a body mass index of 23 or higher screened for diabetes. This requires educating providers who previously might rule out diabetes as a risk factor for an Asian who is “skinny” or “average” in build. It requires educating the public that having a BMI of 23 is not a new definition of “overweight” or “obesity” for Asian Americans, but rather a number to look out for, one that should have individuals thinking about making healthy changes to their diet and incorporating healthy changes to their lifestyle, such as exercising. Above all, the campaign seeks to unmask diabetes and prediabetes in Asian Americans, *more than half of whom are undiagnosed*, according to the National Institutes of Health. Go to [www.Screenat23.org](http://www.Screenat23.org)

Sincerely,

(Your Name)

For More Information on the campaign, spreading the message, writing an op-ed, or hosting a live event in your city, email David Hawks at [dhawks@ncapip.org](mailto:dhawks@ncapip.org) or call 202-441-1192. Thank you!

