

January 17, 2019

On behalf of the Endocrine Society (Society), we appreciate the opportunity to provide comments on the Healthy People 2030 national objectives. Founded in 1916, the Endocrine Society represents approximately 18,000 physicians and scientists engaged in the treatment and research of endocrine disorders, such as diabetes, hypertension, infertility, obesity, osteoporosis, and thyroid disease. We are grateful that Healthy People 2030 recognizes the importance of these diseases in its objectives and would like to offer the following, specific comments.

Diabetes

D-2030-01 Reduce the annual number of new cases of diagnosed diabetes in the population

While we are generally supportive, the Society believes that increasing the number of people who are diagnosed with diabetes should be the main goal of this objective. This should be achieved by increasing screening and identifying more individuals with diabetes who do not know they have the disease. We would support revising this objective to “increasing the proportion of individuals who are screened for diabetes and prediabetes”.

D-2030-05: Increase the proportion of adults with diabetes who have an annual eye exam

We are supportive of this objective and believe that a dilated eye exam should be covered by all insurances for patients with diabetes. We recommend the inclusion of the word “dilated” in the objective because it is essential in detecting diabetic retinopathy.

D-2030-06: Increase the proportion of adults with known diabetes who receive an annual urinary albumin test

This objective is consistent with current recommendations for patients with Type 2 diabetes. Recommendations for patients with Type 1 diabetes begin 5 years after diagnosis.

D-2030-07: Increase the proportion of adults with diabetes using insulin who perform self-monitoring of blood glucose at least once daily

The inclusion of this objective is critical for patients with diabetes who use insulin to control their diabetes. Currently patients must pay some of out of pocket costs due to the lack of adequate coverage for testing supplies and meters. We believe this objective strengthens the ability of the diabetes community to improve coverage, which would help to increase the proportion of adults who perform self-monitoring at least once a day. However, we also believe it is important to increase the proportion of adults with diabetes using insulin who monitor their glucose levels with continuous glucose monitoring and would support a separate objective to address this.

D-2030-08: Increase the proportion of persons with diagnosed diabetes who ever receive formal diabetes education

We are strongly supportive of the inclusion of this objective. The use of diabetes self-management training and education services is very low among newly diagnosed patients with diabetes. Patients should receive such training at the time of diagnosis and as needed thereafter.

HP2020 D-8: Increase the proportion of persons with diagnosed diabetes who have at least an annual dental examination.

Annual dental examinations are standard care for people with diabetes. We would like clarification as to why this objective was removed in the HP2030 objectives.

HP 20202 D-9: Increase the proportion of adults with diabetes who have at least an annual foot examination.

We believe increasing the proportion of adults with diabetes who have an annual foot examination should be added to the Healthy People 2030 list of objectives. This objective is a necessary step in achieving Healthy People 2030 diabetes objective D-03: reduce the rate of lower extremity amputations in adults with diagnosed diabetes. We ask if collection and reporting of data on adults with diabetes who receive an annual foot exam could be included as a sub-objective to Healthy People 2030 objective D-03.

Nutrition and Weight Status:

NWS-2030-02: Reduce the proportion of adults who have obesity

We support this objective and appreciate its use of person-first language (adults who have obesity), rather than “obese”, which was included in the Healthy People 2020 objective.

NWS-2030-03: Reduce the proportion of children and adolescent aged 2 to 19 years who have obesity

While we support this objective, we believe that there should be language that addresses the need for scheduled physical activity/exercise into daily programs at schools.

NWS-2030-08: Increase consumption of whole grains in the population aged 2 years and older

We believe this objective should emphasize consumption of high-fiber, whole grains.

NWS-2030-14: Increase consumption of vitamin D in the population aged 2 years and older

We support this objective but believe that “increase” should be changed to “ensure” in each item using the word “increase”. Consumption of vitamin D is important to avoid deficiency and we believe “increase consumption” is too broad. The Society’s clinical practice guideline on Vitamin D recommends that children over the age of 1 should receive 600IU of Vitamin D each day.

NWS-2030-04 Increase the proportion of physician office visits made by adult patients who have obesity that include counseling or education related to weight reduction, nutrition, or physical activity.

We are supportive of this recommendation but suggest expanding the language to include referrals to evidence-based weight reduction, nutrition, or physical activity programs, such as the National Diabetes Prevention Program.

Arthritis, Osteoporosis, and Chronic Back Conditions

We believe there should be a separate category for osteoporosis, which is distinct from arthritis and chronic back conditions.

AOCBC-2030-05: Reduce the proportion of adults with osteoporosis

We support the intent of this objective but would recommend amending it to say “reduce the proportion of adults with osteoporosis who need treatment and are not on any treatment for their osteoporosis.” Screening for osteoporosis, and appropriately diagnosing the disease, is



critical, particularly among patients who have fragility fractures and need subsequent treatment. There are an estimated 10 million Americans with osteoporosis, 80% of which are women. Approximately one in two women over the age of 50 will fracture a bone because of the disease. A recent study found that more than 42 percent of eligible women between the ages of 65 and 74 were not screened. The U.S. Preventive Services Task Force recommends screening women 65 years and older for osteoporosis with bone measurement. Increasing screening, particularly among older women, is essential in reducing the proportion of adults with osteoporosis.

AOCBC-2030-06: Reduce hip fractures among older adults - aged 65 years and older

Similar to our recommendation in AOCBC-2030-05, we believe the objective should say “reduce hip fractures among older adults-aged 65 years and older with osteoporosis who need treatment and they are not on any treatment for their osteoporosis.”

Environmental Health

EH-2030-11: Reduce exposure to bisphenol A in the population, as measured by blood or urine concentrations of the substance or its metabolites

We are encouraged by the inclusion of objective number EH-2030-11, which recognizes the need to reduce exposure to bisphenol A (BPA). Scientific research has demonstrated the endocrine-disrupting potential of not only BPA, but closely-related compounds that resemble BPA such as BPS, BPF, and others. To prevent the substitution of BPA exposures with these or other potentially harmful structural analogues, we recommend that objective EH-2030-11 be strengthened such that it reads: Reduce exposure to bisphenol A and structural analogues in the population, as measured by blood or urine concentrations of the substance or its metabolites.

New Objective:

We appreciate the need to measure and monitor exposures and consequent health effects, as for example in objective number EH-2030-12. However, to ensure that the endocrine-disrupting effects of chemicals can be captured, monitoring studies must be able to assess low-dose and environmentally relevant exposures and evaluate these exposures against sensitive endpoints for human health effects. We therefore recommend the inclusion of a new research objective statement in the environmental health section to read as follows: Objective Statement: Increase the ability of states, territories, tribes, and the District of Columbia to contribute to monitoring studies to assess low-dose human exposures to environmental chemicals and link exposures to sensitive endpoints for human health effects.

Thank you for the opportunity to provide comments. Should you have any questions, please don't hesitate to contact Endocrine Society Director of Health Policy Meredith Dyer at mdyer@endocrine.org or 202-971-3637.

Sincerely,

A handwritten signature in cursive script that reads "Susan Mandel".

Sincerely
Susan Mandel, MD

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SOCIETY 
President, Endocrine Society