



**AUSDIAB**  
AUSTRALIAN  
DIABETES,  
OBESITY &  
LIFESTYLE STUDY

# THE AUSDIAB STUDY

# 2011

Issue #7

## GOVERNMENT INVESTS IN THIRD ROUND OF AUSDIAB STUDY

Associate Director of Baker IDI Heart and Diabetes Institute, Jonathan Shaw led the successful application for a federal government grant of \$2.5 million to track the 11,000 AusDiab participants over another five years to determine how many have developed diabetes, obesity, kidney and heart disease.

Commenting on the grant, Associate Professor Shaw said "I'm delighted to announce that the AusDiab team has been successful in obtaining funding from the National Health and Medical Research Council to conduct the third round of testing in the AusDiab study".

"The Council was the major funder of the last round of AusDiab in 2004/05 and it is a tremendous achievement to have secured their funding again," he said. "One of the reasons that the Council was keen to support AusDiab was the length of time that the study has now been running.

**“The third round of testing will enable us to compare the measurements at the start of the study in 1999 with new measurements this year and next year, and develop powerful tools to predict who stays healthy and who is at risk of diseases like diabetes,”** A/Prof Shaw said.



"These tools add to our understanding of the causes of disease, and make it possible for doctors to pick out those people whose health may be heading in the wrong direction, and to put measures into place to minimise risk.

"We will soon be inviting all those who have previously taken part in AusDiab to come along again to one of our testing centres," A/Prof Shaw said. "Once again, we will be doing blood tests, physical measurements, and asking you about your health and lifestyle.

**“Our focus will be broad, across many health conditions, and it will be just as important for us to study those who have health problems as those who remain in perfect health – comparing one group with another is the key to understanding health challenges.”**

### Features

- 2** How standing more can improve your health
- 4** A healthy meal option approved by the experts
- 5** A snapshot of our nation in 2025

**THE THIRD ROUND OF TESTING FOR THE AUSDIAB STUDY WILL START SOON – SEE THE BACK PAGE OF THIS NEWSLETTER FOR DATES AND LOCATIONS**



# HOW, WHY AND WHEN? THE AUSDIAB STUDY EXPLAINED

AUSDIAB IS A NATIONAL SURVEY ON DIABETES, OBESITY, CARDIOVASCULAR DISEASE, KIDNEY DISEASE AND RELATED CONDITIONS. From 1999 to 2000 the first survey, as you may recall, was undertaken and 11,247 men and women aged 25 years or older volunteered their time and took part in the study. Another full survey was conducted from 2004 to 2005, and over the past 11 years, participants like you have continued to provide additional information about their health by completing postal and telephone questionnaires. All this information has helped to improve our understanding of how diabetes, obesity, cardiovascular disease and kidney disease impact on the health of Australians.



## Public health surveys need to include a broad range of people from the community

It is important to develop a better understanding of the impact of disease on everyone in the community, and for this reason AusDiab includes both men and women, younger and older people, people from different ethnic and language backgrounds, and people who are well and not well.

This ensures that the results do not only apply to one particular group (e.g. people with diabetes) but are meaningful to a broad cross-section of the community. It also enables comparisons to be made between different groups of people which help us to understand why some people get sick and others do not. If we can work out what factors are making people sicker than others, it will help us to identify better preventative and treatment strategies for disease.

## HOW STANDING MORE CAN IMPROVE YOUR

Lack of physical activity is an important risk factor in the development of chronic diseases like heart disease and diabetes. But just why Australians are reducing their physical activity is a significant question for researchers.

And it's not just exercise that researchers have in their sights. Sedentary behaviour, or sitting for long periods, is equally important in understanding chronic disease. Baker IDI's Head of Physical Activity Research, Associate Professor David Dunstan has a particularly grim warning when it comes to leisurely pursuits such as watching TV.

**In a study conducted using AusDiab data, A/Prof Dunstan found that each hour a day spent in front of the television was linked with a greater risk of dying from cardiovascular disease and an 11 per cent increase in death overall, irrespective of a person's physical activity level.**

The study, published in an international health journal in January 2010, received worldwide attention and is a warning for us all about sitting for too long during the day – even if we engage regularly in exercise. A/Prof Dunstan said the results weren't unexpected.

**“When we're in a sitting posture, we're using our muscles very much, and we know from research that muscle contractions are important for metabolic processes, such as the ability to breathe and produce energy. That can cause insulin resistance, leading to a spike in the blood sugar levels, leading to diabetes.”**

“What we are now starting to understand is that exercise isn't the only way we need to reduce our sitting time,” A/Prof Dunstan said.

“This doesn't have to be hard. It could involve standing work, taking public transport instead of sitting in the car, or doing chores such as folding the ironing.”

**“THE MESSAGE IS THE MORE YOU MOVE, THE BETTER FOR YOUR HEALTH.”**

*Associate Professor David Dunstan has been part of AusDiab surveys for 12 years.*

## Health status needs to be measured accurately

There are lots of different ways to measure a person's health status; these include taking measurements (e.g. blood pressure), doing blood tests (e.g. cholesterol) and asking people to complete questionnaires (e.g. diet and nutrition). It is important that the best possible tests are conducted to ensure that the information collected during the health survey is accurate. That is why we ask you and others in this study to return for a full physical examination every few years. This gives us an opportunity to actually measure things like blood sugar levels, blood cholesterol levels and blood pressure to track health status over a long period.

## Follow-up information is vital

The first AusDiab survey was conducted in 1999-2000 and a second survey was conducted in 2004-2005. We will now conduct a third survey in 2011-2012.

**It is important to collect health information from the same group of participants over several years of follow-up as this helps us to track changes in your health. This knowledge will help us develop a better picture of the impact of changes in health of all Australians.**

While information from one survey will help to answer questions like "How many people have diabetes?" and "Among people with high blood pressure what other health problems do they also have?", it cannot tell us anything about whether the number of new cases of diabetes is increasing or decreasing, or whether the high blood pressure caused the other health problems experienced by the individual. It is important to follow people over several years to see what the health consequences are of having risk factors like high blood pressure or high blood sugar.

## The benefits of conducting public health surveys

To you as a participant, the benefits may seem small but the results from AusDiab have provided the first national information on the numbers of people in Australia with diabetes, obesity and kidney disease. This information has been quoted in many government reports and has been instrumental in helping to shape public policy and plan health services. The AusDiab study is also well-recognised internationally, with many of the AusDiab researchers presenting important findings at scientific meetings and publishing in a large variety of medical journals. There have been 122 publications so far.

## R HEALTH

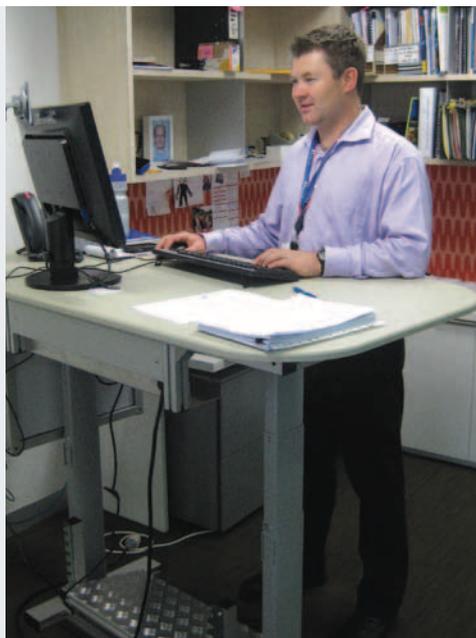
are not using our  
from extensive evidence that  
for the body's regulatory  
break down glucose and use it  
assistance, which can trigger  
leading to type 2 diabetes.

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ar or standing while doing household

## THE GREATER THE BENEFITS

providing expertise to the AusDiab



Work is a key area where some people engage in long periods of sedentary behaviour. A/Prof David Dunstan practices what he preaches... by alternating between sitting and standing during his work day.

# THE AUSDIAB TEAM WELCOMES NEW MEMBERS...

The AusDiab team is proud to introduce two new members who bring new skills to the AusDiab study.



**DR LEI CHEN**

Dr Chen, an endocrinologist from Shanghai, started as an epidemiologist with the AusDiab team in January 2011. She also worked with the team as part of her PhD project to look at ways of using a diabetes risk assessment tool for the identification of Australian adults at high risk of developing type 2 diabetes.

Dr Chen's role in this public health research study involves ensuring it is carried out in accordance with ethical guidelines. As someone who specialises in studying the health patterns of communities, she is one of several epidemiologists involved in this important health care study.



**REBECCA COATES**

Rebecca has an engineering background and her role as Research Data Manager with the AusDiab team means that she is responsible for developing software solutions to replace handwritten forms for this third round of the survey. This is an important and vital job when dealing with information from some 9000 participants.

# A HEALTHY ALTERNATIVE

## Harissa chicken with capsicum and herb salad



Harissa is a hot, spicy red paste served traditionally in North Africa in countries like Tunisia, Morocco, Algeria and Libya, often with bread for dipping. It is a wonderful accompaniment to lamb shanks with couscous and works really well here with chicken.

**Serves:** 4

**Prep time:** 20 minutes, plus marinating time

**Cooking time:** 5 minutes

**1 serve =**

1½ units protein  
½ unit dairy  
1½ units vegetables  
2 units fats

- 1 teaspoon ground cumin
- 1 teaspoon ground coriander
- 5 red chillies, roughly chopped
- 2 cloves garlic, roughly chopped
- 1 tablespoon olive oil
- 1 tablespoon lemon juice
- 2 x 300 g chicken breast fillets, sliced in half horizontally to make 4 pieces
- minted yoghurt

#### Capsicum and herb salad

- 1 red (Spanish) onion, chopped
- 1 red capsicum (pepper), seeded and diced
- 1 green capsicum (pepper), seeded and diced
- 2 sticks celery, thinly sliced
- 1 cup (20g) flat-leaf parsley leaves
- 1 cup (20g) mint leaves
- 1 tablespoon olive oil
- 1 tablespoon lemon juice (or to taste)
- freshly ground black pepper

**1** Combine the cumin, coriander, chilli, garlic, oil and lemon juice in a small food processor and blend to a paste. Place in a large glass or ceramic bowl with the chicken and turn to coat well. Cover and marinate in the fridge for at least 2 hours or preferably overnight.

**2** To make the salad, place the onion, capsicum, celery, parsley and mint in a bowl. Add the oil and lemon juice and season with pepper. Toss to combine.

**3** Heat a barbecue grill plate or heavy-based frying pan over medium heat and cook the chicken for 2–3 minutes on each side or until just cooked through.

**4** Serve the harissa chicken with the mint yoghurt and capsicum and herb salad.

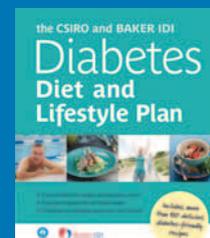
*\* You could dice the chicken before adding it to the marinade and thread onto skewers.*

*\* This marinade is also suitable for fish – but only marinate it for half an hour.*

This recipe comes from *the CSIRO and Baker IDI Diabetes, Diet and Lifestyle Plan*, which is published by Penguin and is now available from book stores and major retailers. The CSIRO team that produced the bestselling Total Wellbeing Diet books has teamed up with Baker IDI Heart and Diabetes Institute to produce this new title. Whether you have diabetes or not, this book aims to provide guidance on diet and lifestyle, including what to eat, how to get fit and lose weight, easy-to-follow menus and activity plans, as well as tips for grocery shopping and eating out.

For more information, visit Penguin Books Australia at

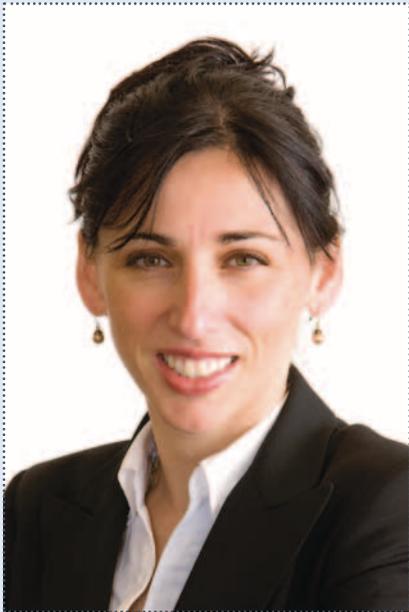
<http://www.penguin.com.au/products/9780143202264/csiro-and-baker-idi-diabetes-diet-and-lifestyle-plan>



**Did you know?**

YOU CAN FIND A RANGE OF INFORMATION ABOUT THE AUSDIAB STUDY, INCLUDING THE 1999-2000 AND 2004-2005 SURVEYS AS WELL AS PAST NEWSLETTERS AND A LIST OF KEY STAFF AND COLLABORATORS INVOLVED IN THIS PROJECT, ON THE BAKER IDI WEBSITE AT <http://www.bakeridi.edu.au/ausdiab/>

# A SNAPSHOT OF OUR NATION IN 2025



The information collected through AusDiab is helping people like Baker IDI researcher, Dr Dianna Magliano (pictured left) to predict future diabetes and obesity rates to inform health care professionals and governments so that they can plan for changes in the population and their related health needs.

**Using AusDiab data, Dr Magliano has projected that 11 per cent or about two million Australians are expected to develop diabetes by 2025 if current disease trends remain stable but it could increase to as high as 17 per cent, or about three million people if trends continue to rise.**

Dr Magliano has also projected that 72 per cent of people aged over 25 will have a weight problem by 2025. Just 28 per cent of the population would be of healthy weight while 38 per cent would be overweight and 34 per cent would be obese.

“Vast changes in the way that people live, including loss of jobs involving more physical activity and changes to transport, are contributing to obesity in genetically predisposed people,” she said.

Dr Magliano’s work, which was presented at the Victorian Obesity Consortium Symposium in December 2010, received national media attention.



The AusDiab Study has had a major impact on health care planning in Australia, alerting governments and policy makers to the scale and impact of heart and kidney disease, diabetes and obesity, with the results translated into national screening and prevention programs. The study has also been cited in dozens of research studies and received considerable media attention.

## USEFUL LINKS

**Baker IDI Heart and Diabetes Institute**  
[www.bakeridi.edu.au](http://www.bakeridi.edu.au)  
 (03) 8532 1111

**Diabetes Australia**  
[www.diabetesaustralia.com.au](http://www.diabetesaustralia.com.au)  
 1300 136 588

**Kidney Health Australia**  
[www.kidney.org.au](http://www.kidney.org.au)

**Quit Now**  
[www.quitnow.info.au](http://www.quitnow.info.au)  
 131 848

**National Heart Foundation of Australia**  
[www.heartfoundation.org.au](http://www.heartfoundation.org.au)  
 1300 362 787

**Dietitians Association of Australia**  
[www.daa.asn.au](http://www.daa.asn.au)  
 (02) 6163 5200

**Australasian Podiatry Council**  
[www.apodc.com.au](http://www.apodc.com.au)  
 (03) 9416 3111

# DATES AND LOCATIONS FOR THE THIRD ROUND OF TESTING

Further information relating to the actual venues, dates and times will be sent to you as we get closer to the listed dates. However, keep in mind that if, for example, you were originally tested in Western Australia and have since moved to Queensland – then you can see from the table below that we go to six sites there. We will do our best to try and match your current address to the closest site to you.



IF YOU HAVE RECENTLY MOVED OR WISH TO DISCUSS THE NEXT FIELD STUDY, THEN PLEASE CALL THE TOLL FREE NUMBER – 1800 220 228

VICTORIA	2011
PARKDALE	24/08 - 29/08
BURWOOD	02/09 - 06/09
BLACKBURN	09/09 - 13/09
WATTLE GLEN	16/09 - 20/09
BENDIGO	23/09 - 27/09
MILDURA	30/09 - 04/10

NEW SOUTH WALES	2011
GRAYS POINT	19/10 - 24/10
HURSTVILLE	28/10 - 01/11
ORANGE	11/11 - 15/11
BERKLEY VALE	18/11 - 22/11
WEST PENNANT HILL	25/11 - 29/11
AUBURN	02/12 - 06/12

WESTERN AUSTRALIA	2011
SCARBOROUGH	28/10 - 08/11
TRIGG	28/10 - 08/11
KARDINYA	11/11 - 15/11
HIGH WYCOMBE	17/11 - 22/11
MOUNT HELENA	25/11 - 29/11
OAKFORD	02/12 - 06/12

SOUTH AUSTRALIA	2012
UNLEY	10/02 - 21/02
NETLEY	10/02 - 21/02
MILLICENT	24/02 - 28/02
GLENELG	02/03 - 06/03
PARAFIELD GARDENS	09/03 - 13/03
PORT LINCOLN	16/03 - 20/03

QUEENSLAND	2012
CAIRNS	09/02 - 13/02
NAMBOUR	17/02 - 21/02
STAFFORD HEIGHTS	24/02 - 28/02
TOOWOOMBA	02/03 - 06/03
CURRUMBIN	09/03 - 13/03
CHAPEL HILL	16/03 - 20/03

NORTHERN TERRITORY	2012
MARRARA	27/04 - 01/05
WAGAMAN	04/05 - 09/05
NIGHTCLIFF	11/05 - 15/05
PARAP	18/05 - 22/05
LARRAKEYAH	25/05 - 29/05
DRIVER	01/06 - 05/06

TASMANIA	2012
ALANVALE	27/04 - 01/05
ULVERSTONE	04/05 - 08/05
RAVENSWOOD	11/05 - 15/05
GEORGE TOWN	18/05 - 22/05
TAROONA	26/05 - 30/05
BLACKMANS BAY	01/06 - 05/06

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