

NIDDM patients makes their detection through screening seductive for an organization such as ADA. However, no data, new or old, support this approach. In the absence of effective therapy to decrease morbidity or mortality in the asymptomatic phase, large-scale screening is not justified. Although one may argue that there is no harm in identifying such patients, the expense of such programs drains medical resources that may be better spent. In addition, the impact of labeling an individual as diabetic is not trivial, with regard to both the patient's self-perception of health and employment and insurance issues (11). We encourage ADA to reconsider its position statement in light of the above information.

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Reply

The Committee on Professional Practice (COPP) of the American Diabetes Association (ADA) is the body responsible for the development of all scientific and medical position statements. These documents are usually prepared by a task force comprised of four to six health professionals with an interest in the subject matter. After a statement emerges from the writing group, it is discussed by COPP and then sent to at least a dozen reviewers. The reviewers are chosen on the basis of their expertise and familiarity with the issue, and reviewers are selected who are familiar with any regional variations in clinical practice that may be important. Individuals who have an opinion that may conflict with the thrust of the statement are also chosen.

Nearly two dozen experts served as reviewers for the position statement on screening for diabetes. In addition, the final statement underwent review and approval by COPP and the ADA Executive Committee. The point of view articulately conveyed by Drs. Nathan and Singer was heard, but the majority of the scientific and medical community surveyed disagreed with their opinion. ADA position statements do not convey or portend to convey the unanimous belief of all professionals. Rather, position statements are intended to reflect a consensus medical opinion, one that the vast majority of practitioners espouse.

COPP appreciates the concerns expressed by Schlossbach. We definitely do not want people who assist with fingersticks or draw blood samples to contract an infectious disease. The recent Centers for Disease Control guidelines on the handling of specimens from suspected or known carriers of human immunodeficiency virus or hepatitis should be followed.

The position statement refers to plasma because that is the fluid in which glucose is measured. Indeed, plasma is tested by many strip methods when whole blood is placed on a strip or, of course, when it is intentionally isolated from whole blood.

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Insulin as Risk Factor for Vascular Disease

The consensus statement of the American Diabetes Association on the role of cardiovascular risk factors in the prevention of macrovascular disease in diabetes de-emphasizes the role of insulin as a significant contributory factor in the development of diabetic macrovascular dis-