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Member American Brokerage Centers, LLC

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Metabolic Syndrome

What is it??

Introduction:

In this Newsletter I am going to depart a bit from the usual approach of discussing a particular disease entity, what it is, and how it might be handled by the companies ABC, LLC does business. Instead I'll focus on something that is best described as a cluster of conditions that occur together. **Metabolic Syndrome** is sometimes called Syndrome X the Deadly Quartet or Insulin resistance syndrome. **Metabolic Syndrome** is a term used for a cluster of cardiovascular risk factors associated with increased risk for type 2 diabetes, cardiovascular disease, and renal failure. Research into the complex underlying process linking this group of conditions is ongoing. Metabolic syndrome is tied to the body's metabolism and possibly a condition called insulin resistance. Doctors have talked about a constellation of risk factors for years calling it by many names most notably Syndrome X. Whatever it is called this collection of risk factors is becoming more prevalent.

Signs and Symptoms:

Metabolic Syndrome means that the applicant has several disorders related to the metabolism at the same time.

These include:

- 1) **Obesity**, particularly around the waist, (having an apple shape) generally in males. This means a waist circumference greater than 40 inches or greater than 35 inches in women.
- 2) **Elevated Triglycerides**
- 3) Low **HDL Cholesterol** defined as less than 40 mg.
- 5) **Systolic blood pressure** greater than 130 or **diastolic blood pressure** greater than 85 mm.
- 6) One final factor is **fasting blood glucose** greater than 110 mg that indicates a resistance to insulin.

The prevalence of **Metabolic Syndrome** in the general US population is estimated to be 22%. This is due in part to the increase in obesity in recent years. **Metabolic Syndrome** is increasing

in the general population particularly as age increases. More than 40% of individuals over the age of 60 can fall into this group. Other than age and obesity other risk factors include race. Hispanics and Asians seem to be at a greater risk for **Metabolic Syndrome** than other races. A family history of diabetes or a history of diabetes during pregnancy (gestational diabetes) is also risk factors for **Metabolic Syndrome**.

Treatment:

Treatment is focused on trying to prevent cardiovascular disease and type 2 diabetes. Treatment consists of lifestyle modification, weight control, diet, and exercise. Treatment is aimed at reducing the individual **Metabolic Syndrome** risk factors. Medications such as Glucophage and Actos may be used to lower insulin resistance. These meds are also used to control NIDDM.

Applicants who aggressively work at trying to lower their weight and exercise regularly will get the better ratings. Applicants who smoke cigarettes will worsen the health consequences of **Metabolic Syndrome** as smoking increases insulin resistance.

Prognosis:

Individuals with metabolic syndrome are at increased risk for developing cardiovascular disease and type 2 diabetes. Because you need at least three of the risk factors to have the diagnosis of metabolic syndrome the risk for developing diabetes and or cardiovascular disease is greatly increased. The total risk then becomes greater than the sum of the risks for the individual factors. The prognosis is improved with the normalization of BP; Glycohemoglobin A1C is below 7% and significant LDL cholesterol reductions. Prognosis depends upon the ability of the applicant to modify risk factors.

Underwriting:

I would love to say that one of the ABC, LLC companies is very good in handling **Metabolic Syndrome**. None of them are aggressive. There is no Underwriting Guideline for the impairment **Metabolic Syndrome**. Rather the approach is taking each of the individual components and rating them. Risk Classification then is a matter of going to each of the individual sections Build, Hypertension, Type 2 Diabetes, Impaired Glucose tolerance, Obesity etc. and debiting each of those factors. Preferred will never be available to applicants who have this diagnosis. Even those who have aggressively modified their risk factors will not be able to get preferred. If anything those who have **Metabolic Syndrome** will not be getting any credits for normal Treadmills or favorable BP control

With the increasing incidence of obesity even among the young, we will be seeing this diagnosis more and more in APS records on our applicants. It is not going to be aggressively underwritten.

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