It would make sense that if you want to lose weight, you get into a program that's all about shedding pounds. Judy Belle-Isle had been doing that since her first Weight Watchers experience in eighth grade. Truth be told, she didn't have much to show for it.

"I've been battling with obesity my whole life," said the 61-year-old associate quality and compliance officer at the Eastman Institute for Oral Health at the University of Rochester Medical Center.

A screening through a university wellness initiative showed an elevated glucose level, and Belle-Isle was invited to join the Diabetes Prevention Program being run by the Center for Community Health at URMC. She lost 30 pounds and survived holiday cookie season with minimal damage.

"This was about nutrition and changing your eating habits," she said. "It was the right time, the right place, the right information."

The program replicates a national model that has shown success in research settings. Last month, the Greater Rochester Health Foundation announced a three-year grant for $471,596 to allow the Center for Community Health to bring the Diabetes Prevention Program to 11 primary care practices that serve a large number of inner city or minority patients who are at greater risk for diabetes. The program is designed for people who are pre-diabetic, which can be detected by a blood test.
"This is one of the real opportunities in medicine to work on someone before the disease occurs," said Jim Sutton, director of the Office of Community Medicine for Rochester General Health System. The program is about to start at its Clinton Family Health Center site. "This is the direction we should be going in health care."

The Anthony L. Jordan Health Center, Culver Medical Group, East Ridge Family Medicine, and Unity Health System also are enrolling patients. Other practices will be identified later this year.

"We spend our whole careers chasing diabetics after the person has become diabetic," Sutton said. "This is an opportunity to prevent it from happening."

The community has been talking about diabetes for several years in advance of what health experts fear could be an epidemic. The Centers for Disease Control and Prevention reported that in New York, the age-adjusted rate for adults diagnosed with diabetes went from 4.2 percent in 1994 to 8.4 percent in 2010. It reported that in Monroe County in 2008, the last year for which data is available, the age-adjusted rate of adults with diabetes was 7.8 percent.

According to a 2008 report from the Finger Lakes Health Systems Agency, Latinos were hospitalized for diabetes at 2 1/2 times the rate of whites and non-Latinos. In Monroe County, the rate of African-Americans who had ever been told they had diabetes was 20 percent, compared to 9 percent for white people, according to the county health department.

"The picture is worrisome," said Wade Norwood, director of community engagement for the Finger Lakes Health Systems Agency. "So Greater Rochester Health Foundation's investments in these areas are really important." John Urban, president of the foundation, said the program "will begin to address the issue of inequality of health care in this particular condition." The grant includes money to train people in the practices to keep the program going after the funding runs out. "That's much better than having a good program and seeing it disappear in three years," Urban said.

The Diabetes Prevention Program is just one approach to stopping the disease. Another has been the Healthy Living Program, a 12-week program that includes nutrition and exercise that is part of the Center for Community Health.
The Healthy Living Program has been run at the Brown Square and Woodward Health Center locations of Jordan Health Center. In an initiative that is separate from the GRHF grant, that program will be compared to the Diabetes Prevention Program.

"We're trying to take in everything that's available and bring it to patients," said Dr. Laurie Donohue, medical director at Brown Square and Woodward. "One thing is not necessarily going to work with another person. We're trying to take from all sources and create a buffet."

Dr. Nancy Bennett, director of the Center for Community Health, said that studies on the Diabetes Prevention Program reported a 60 percent reduction in the onset of diabetes among participants. But a research setting can be artificial. "We're interested in the potential for doing this onsite in practices, so they could link better to the health care system," she said. "Could we do this in a clinical setting where basically we're taking all comers?"

The Diabetes Prevention Program runs 22 weeks. Participants meet as a group with a staffer from the Center for Community Health who leads a discussion about healthful choices. While the program includes counseling about exercise, the group doesn't engage in activity during the sessions.

"For the population we work with, providing some exercise seems like a good thing," Bennett said. "On the other hand, the whole aim of this kind of program is to help people make permanent change in their life. In order to do that, they need to own what they do. In some ways, it may be better for them to figure it out."

Belle-Isle of Greece said the program makes participants aware of and accountable for their choices. It teaches what to do, but doesn't provide a formula for how to do it. When it came to exercise, because of hip and back issues, she decided that she'd do well with water exercise and sought out a program from the physical therapy service at Rochester Rehabilitation.

"You have to be motivated, but it gives you the tools to make the change," she said. "I'm committed to not becoming a diabetic."

PSINGER@DemocratandChronicle.com