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## Media Release

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## Study shows that indigenous people are not genetically prone to diabetes

The high rate of diabetes among indigenous people is not due to their genetic heritage, according to a recently published study.

The study was authored by Dr Yin Paradies, an epidemiologist from Darwin's Menzies School of Health Research along with two researchers from the United States. It shows that the high rates of diabetes among indigenous people across the globe are rooted in social disadvantage rather than a genetic pre-disposition specific to indigenous populations.

"Around the world, indigenous people suffer from diabetes at 2-5 times the rate of non-indigenous people", says Dr Paradies.

"There is a common misconception that diabetes is 'in the genes' for Indigenous people. This idea stems from the 'thrifty gene hypothesis' which proposes that cycles of feast and famine in indigenous societies created a gene that was very efficient at using nutrients. According to this hypothesis, such efficiency combined with a modern affluent and sedentary lifestyle leads to obesity and diabetes among indigenous people."

"Although there is certainly a genetic component to diabetes that affects people throughout society, the idea that indigenous people have a 'thrifty gene' is dispelled by our research which shows that when it comes to diabetes, genes are no more important for indigenous people than for anyone else."

"Instead, it is aspects of the social environment that are responsible for the high rates of diabetes among indigenous people. Poor diet, reduced physical activity, stress, low birth weight and other factors associated with poverty all contribute to the high rate of diabetes among indigenous people", Dr Paradies said.

"For indigenous people, diabetes will only be tackled by addressing poverty and social disadvantage".

This study appears in the Spring issue of the journal *Perspectives in Biology and Medicine* and is co-authored by anthropologist Michael Montoya from the University of California, Irvine and population biologist Stephanie Fullerton of the University of Washington.

Media contact – Lisa Stapels (0402 302 477)

◇Phone (08) 8922 8989 ◇Fax (08) 8927 5187 ◇Mob 0402 302 477  
◇E mail [lisa.stapels@menzies.edu.au](mailto:lisa.stapels@menzies.edu.au) ◇www.menzies.edu.au  
◇Address John Matthews Building, Royal Darwin Hospital, Tiwi, NT, 0811