**Abstract**

Susto is an illness often referred to in Hispanic tradition. Often considered a classic example of a culture-bound syndrome, susto is frequently discounted in Western biomedical practice. Recent research has centered on discovering Hispanic explanatory models for disease and bridging the divide between the explanatory models of Hispanic patients and their medical practitioners. While progress is being made toward reconciled negotiations of explanatory models between patients and practitioners, susto may have more significance than previously realized. Hispanic patients diagnosed with diabetes often believe that a previous cause of susto caused their condition. Such a common belief may underlie a relationship of deeper significance.

Study participants are recruited from a population of 500 patients under treatment by a local non-profit group providing health care visits and medications to Hispanics with diabetes. Patients wishing to be involved in the study participate in a focus group and currently ongoing one-on-one ethnographic interviews.

A relationship found to exist between the two illnesses will have implications for biomedical, for early diagnostic and treatment of disease, and for the effective negotiation of explanatory models in the treatment of susto and validation thereof as more than just a "jilted illness."

**What is Susto?**

There is no single definition of susto. For some, susto refers to both cause and effect. In those cases, the illness of susto may be the result of stress due to the experience of a susto, or fright, or that it causes death and/or death. For susto, there was no clear distinction. While Susto may have been seen as a condition arising due to fright or a traumatic event, for susto, the condition was internalized or transformed into the body, or through ethnomedical techniques in which susto was treated without taking legal measures. This is a common cause often associated with social support from friends and families, or susto sufferers may feel overwhelmed and are often unable to fulfill their usual social obligations (Lumsden 1981).

**Literature Review**

Studies of susto and related illnesses trace back to the mid-twentieth century. Since the early 1980s, the literature has considered these illnesses from the standpoint of sociopsychological, psychoanalytical, and from a holistic point of view. Previous research on susto has indicated the need for sustained plays in the Hispanic folk model of diabetes, as well as described susto as a culture-bound syndrome, or CBS (Hughes 1981; Simons 1985). As a CBS, susto would be an illness experienced only by Hispanics. The culture-bound syndrome concept was a new idea, however, and considerable debate exists as to its usefulness (Clemons 1980).

When hearing of their diabetes diagnoses, many Hispanic individuals are able to think back and identify a past experience that caused the illness. They may view susto as a precipitating condition causing diabetes rather than an illness in itself (Jarewski and Piezas 2002:440). These ideas about susto are part of their explanatory models (O'Nell 2004), or the individual beliefs they hold about diabetes and susto. Recent research has centered on discovering Hispanic explanatory models for disease (Jarewski & Piezas 2002; Wolfe et al. 1999) and bridging the divide between the explanatory models of Hispanic patients and their medical practitioners (Bair & Nausell 1993; Reimann et al. 2004). Diabetes and susto may overlap in the medical anthropological literature consistently. It is possible that this overlap is significant enough that it has implications for the diagnosis and treatment of diabetes among some Hispanic patients. This paper will highlight the interaction of susto and diabetes, and discuss the relationship between diabetes and susto (Cornado et al. 2004; Piezas & Jarewski 2002; Jarewski et al. 2009) and in research conducted in multiple sites thousands of miles apart (Weller et al. 1999), diabetes and susto have been causally linked in Hispanic explanatory models for diabetes. This interaction between the two illnesses, however, has not been studied. This relationship has not been studied. This relationship is an area of research that requires further investigation. Such an investigation will better illuminate the apparent connection between the two illnesses and may possibly affect patient/practitioner interaction by increasing effective communication.

**What is the relationship between diabetes and susto?**

**Excerpts from Focus Group Questioning Route (Conducted March 5, 2006)**

1. How long do you think you had diabetes before you were diagnosed?
2. When did you first feel the symptoms of diabetes?
3. What kind of things do you do that make you feel diabetes are coming on?
4. Do you have any other causes of diabetes in your family?
5. Do you have any other causes of diabetes that could be caused by susto?
6. Do you think that susto is a more a matter of chance?
7. Do you think that susto is a more a matter of chance or of someone being overwhelmed by the illness?
8. Are there people who are more likely to get diabetes than others?

**References**

Corner, Mary Anne and Ann Jones 1999 "Mexican Americans' Explanatory Model of Type 2 Diabetes. Western Journal of Nursing Research 24:213-230.