

Help patients with type 2 diabetes achieve blood glucose goals

This information is based on the American Diabetes Association (ADA) Standards of Medical Care in Diabetes—2006 and American Association of Clinical Endocrinologists (AACE) Medical Guidelines for the Management of Diabetes Mellitus, 2002.

Focus on type 2 diabetes management with your patients

After conducting an initial medical evaluation:

- Establish a physician-directed team that includes nurses, diabetes educators, dietitians, pharmacists, mental health professionals, and other specialists, as necessary¹
- Encourage patients to take an active role in their care while working closely with family and healthcare team members¹
- Develop, with the patient, a treatment plan that considers:¹
 - Habits and lifestyle
 - School or work situation
 - Cultural factors
 - Complications and/or other medical conditions
- Set A1C and other lifestyle goals with the patient¹
- Provide educational tools and support¹
- Emphasize the importance of diabetes self-management^{1,2}
- Encourage continuing lifestyle modifications, as appropriate, including:¹
 - Nutrition evaluation and therapy
 - Weight loss
 - Physical fitness program
- Monitor/adjust medications to maximal effective dose to achieve glycemic goals²
- Consider combination therapy to help improve glycemic control²

Monitor blood glucose levels¹

- Teach patients how to conduct self-monitoring of blood glucose (SMBG)
- Routinely evaluate patient technique of SMBG
- Perform periodic A1C measurements
 - At least twice a year for patients who are at their glycemic goal
 - Quarterly for patients who have changed therapy or are not at their glycemic goal

Glycemic goals

ADA (for patients in general) ¹	A1C <7%	FPG 90-130 mg/dL	PPG <180 mg/dL
AACE ^{2,3}	A1C ≤6.5%	FPG <110 mg/dL	PPG <140 mg/dL
HEDIS [®] 2007 ⁴	A1C <7%		

For additional information on recommendations for specific therapies based on a patient's A1C levels, consult the ACE/AACE Road Map (2006) available in the Publications section at www.aace.com.

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References: 1. American Diabetes Association. Standards of Medical Care in Diabetes—2006. *Diab Care*. 2006;29(Suppl 1):S4-S42. 2. American College of Endocrinology/American Association of Clinical Endocrinologists. Implementation Conference for AACE Outpatient Diabetes Mellitus Consensus Conference Recommendations: Position Statement, February 2, 2005. Available at: <http://www.aace.com/pub/pdf/guidelines/OutpatientImplementationPositionStatement.pdf>. Accessed September 26, 2006.

3. The American Association of Clinical Endocrinologists. Medical Guidelines for the Management of Diabetes Mellitus: The AACE System of Intensive Diabetes Self-Management. *Endocr Pract*. 2002;8(Suppl 1):S40-S82. 4. National Committee for Quality Assurance. HEDIS 2007: Effectiveness of care: Comprehensive diabetes care. 2006;(2):112-125.

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