

# Diabetes can be controlled — and even stopped — with practical, evidence-based tools



**T**argeted screening, weight loss through changes in diet and exercise, and careful management strategies are proven tools for preventing diabetes, keeping its costly complications under control and—in some cases—even reversing the course of the disease.

## Screening is the first step—it identifies diabetes and prediabetes

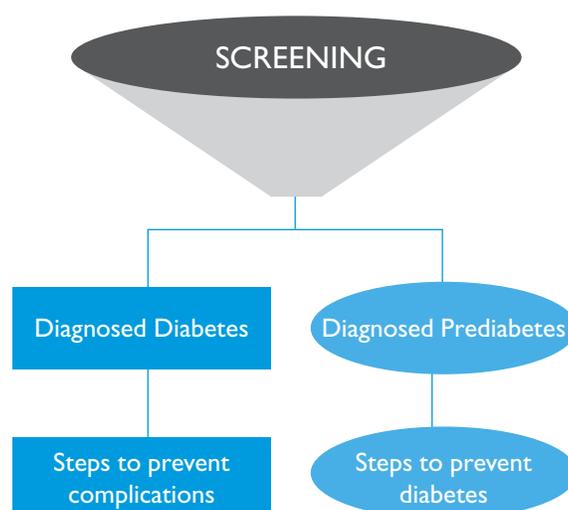
Targeted screening opens the pathway to solutions.

- If screening finds that diabetes already exists, patients and their physicians can take steps to control damaging complications.
- If screening finds prediabetes—that is, people who are on the threshold of diabetes—weight loss and exercise can help pull them back.

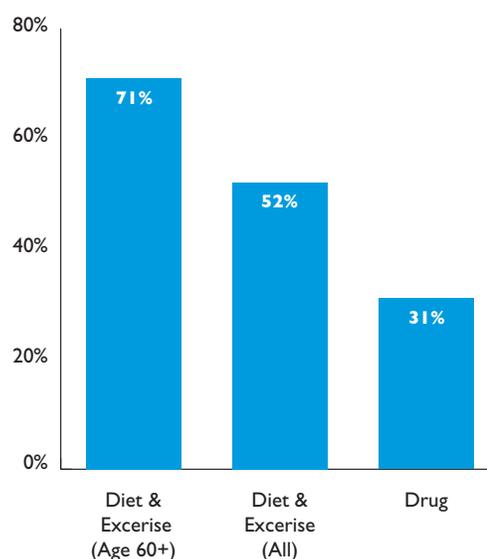
## Diet and exercise can stop diabetes before it starts

Prediabetes often turns into diabetes within 3–8 years<sup>1</sup>, but preventive action can halt or delay the process.

- A National Institutes of Health (NIH) study -- the Diabetes Prevention Program (DPP) -- found that through weight loss and increased physical activity, adults with prediabetes reduced their risk of developing diabetes by 58%; seniors age 60+ reduced their risk by 71%.<sup>2</sup>
- A program within the Centers for Disease Control and Prevention (CDC) -- called the National Diabetes Prevention Program -- is based on the evidence and protocols used in the NIH DPP clinical trial.



## Percent Reduction in Risk of Diabetes, NIH DPP Study



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## Active management of diabetes can control its deadly effects

Diabetes is a gateway disease—often leading to complications such as heart attack, stroke, blindness, kidney disease, and amputations.

- Careful management through steps such as dietary changes, exercise, oral medication, and insulin and other injectable therapies—along with regular lab tests—can reduce the impact of diabetes and control its damage.

## Self-management is an important part of controlling diabetes

People living with diabetes can often minimize their complications through self-management of the disease. Self-management education gives them the knowledge, techniques, and coping skills to manage the condition.

- Studies suggest that people who actively self manage their diabetes are more likely to get necessary care, such as A1C lab tests and eye exams.<sup>3</sup>

## Patient compliance and team-based care play key roles

Patient adherence to treatment and care recommendations is a vital part of managing diabetes.

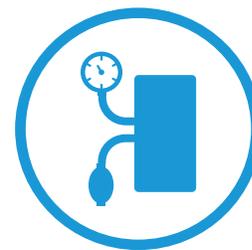
- Only 7% of patients meet goals for A1C, blood pressure, and LDL cholesterol,<sup>4</sup> and patient adherence for oral medications in individuals with type 2 diabetes was 53% and 67% in two studies.<sup>5</sup>

Research shows that team-based care can reduce morbidity and mortality rates in diabetes patients by increasing the percentage of patients with better LDL levels, better blood pressure and lower A1C levels, as well as the number of patients receiving yearly foot and eye exams.<sup>5</sup>

### Components of Self Management



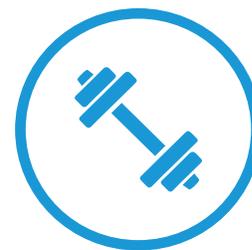
Healthy Eating



Monitoring Blood Sugar

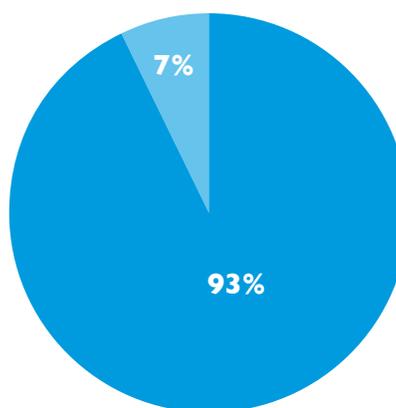


Coping Skills



Exercise & Diet

### Percent of diabetes patients who achieve proper LDL, A1C, blood pressure levels (shown in light blue)



For more information on diabetes and solutions for addressing the epidemic, visit the Diabetes Advocacy Alliance website at [www.diabetesadvocacyalliance.org](http://www.diabetesadvocacyalliance.org).

1 Rhee M, Herrick K, Ziemer D, et al. Many Americans have pre-diabetes and should be considered for metformin. *Diabetes Care*. 2010;33:49-54.

2 Diabetes Prevention Program Research Group (2002) Reduction in the Incidence of Type 2 Diabetes with Lifestyle Intervention or Metformin. *N Engl J Med*. Vol. 346, No. 6. 393-403.

3 Anderson, R.M., Funnel, M.M., Butler, P.M., Arnold, M.S., Fitzgerald, J.T., Feste, C.C. Patient empowerment: Results of a randomized controlled trial. *Diabetes Care* 18:943-949, 1995.; Hofer, T.P., Katz, S.J. Healthy behaviors among women in the United States and Ontario: the effect on use of preventative care. *Am J Public Health* 86:1755-1759, 1996.

4 Gabbay, R.A., Bailit, M.H., Mauer, D.T., Wagner, E.H., Siminerio, L. Multipayer patient-center medical home implementation guided by the chronic care model. *Joint Commission Journal on Quality and Patient Safety* 37:265-273, 2011.

5 Delamater, A.M. Improving patient adherence. *Clinical Diabetes*, Vol. 24, No. 2, 2006. 71-77.