

Professionals - About A1C

A1C Standards of Care

The American Diabetes Association (ADA) recommends A1C testing to determine a patient's average blood glucose control. For patients whose therapy has changed or who are not meeting glycemic goals, the A1C test should be performed quarterly. The A1C test should be performed at least two times a year in patients who are meeting treatment goals and who have stable glycemic control. Guidelines about A1C testing by the American Diabetes Association, International Diabetes Federation, and National Institute for Health and Clinical Excellence are summarized in the table below.

Guidelines for A1C testing in patients with diabetes

The goal of therapy is to achieve an A1C as close to the non-diabetic range as possible without severe hypoglycemia

	A1C target	Frequency of A1C testing
ADA ¹	<ul style="list-style-type: none">■ General population: $\leq 7\%$■ Individuals: $\leq 6\%$	<ul style="list-style-type: none">■ ≥ 2 tests per year if meeting glycaemic goals■ Every 3 months if not meeting glycaemic targets
NICE ²	<ul style="list-style-type: none">■ 6.5–7.5%	<ul style="list-style-type: none">■ Every 2–6 months depending on level and stability of blood glucose control
IDF ³	<ul style="list-style-type: none">■ $< 6.5\%$	

1. ADA Diabetes Care 2007;30(Suppl 1):S4-41

2. NICE 2002. www.nice.org.uk

3. IDF, <http://www.idf.org/home/index.cfm?unode=B7462CCB-3A4C-472C-80E4-710074D74AD3>

Less stringent treatment goals than those noted in the chart above may be appropriate for patients with a history of severe hypoglycemia, patients with limited life expectancies, very young children or older adults, and individuals with comorbid conditions.^[1]

⊕ References