

Professionals - About A1C

Guidelines and Treatment Algorithm

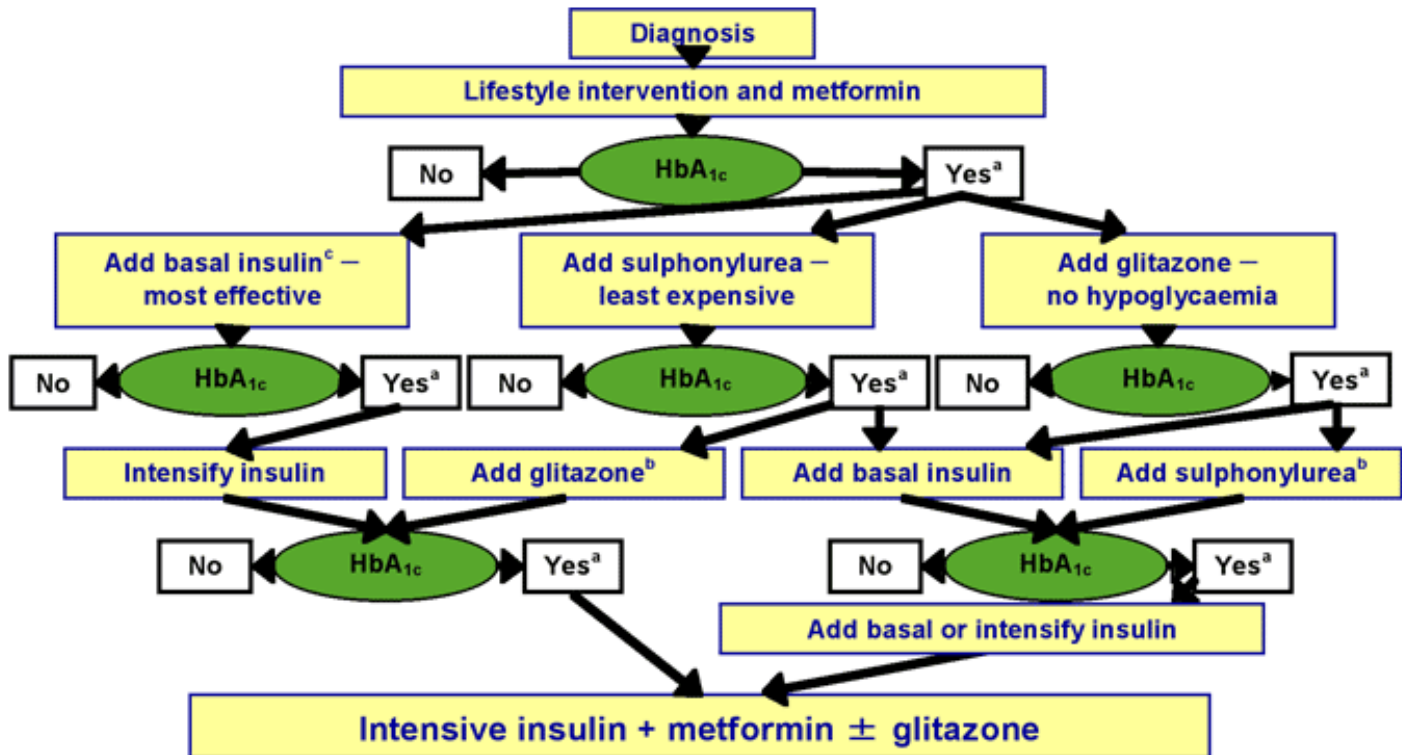
Maintaining A1C levels as close as possible to normal limits has been shown to lower the risk of micro- and macrovascular complications. Despite the advent of novel therapies, historically, diabetes management has failed to achieve and maintain glycemic targets. Therefore, the EASD and ADA recently released joint consensus guidelines to support HCPs by providing treatment algorithms for effective diabetes management.

The Guidelines and Treatment Algorithm emphasize^[1]

- Importance of achieving and maintaining normal glycemic goals
- Initial therapy with lifestyle modifications and metformin
- Rapid addition of medication and transition to new regimens when glycemic goals are not achieved or sustained
- Early addition of insulin therapy in patients who do not meet glycemic goals.
- The guidelines acknowledge the important role of SMBG, particularly to help achieve glycemic goals with the latter two treatment regimens

Diagnosis

Lifestyle intervention and metformin



^a Check HbA_{1c} every month until HbA_{1c} is <7%, and then at least every 6 months.

^b Although three oral agents can be used, initiation and intensification of insulin therapy is preferred based on effectiveness and expense.

^c See algorithm for initiation and adjustment of insulin.

Nathan D, et al. Diabetes Care 2006;29:1963–72. Reproduced with permission.