

Diabetes: 5 Key Checks and Measures

If you have diabetes, you've probably received a lot of information already. You may know about monitoring and medication, about healthy eating and exercise. Hopefully, you've learned the importance of visiting your healthcare provider regularly, too.

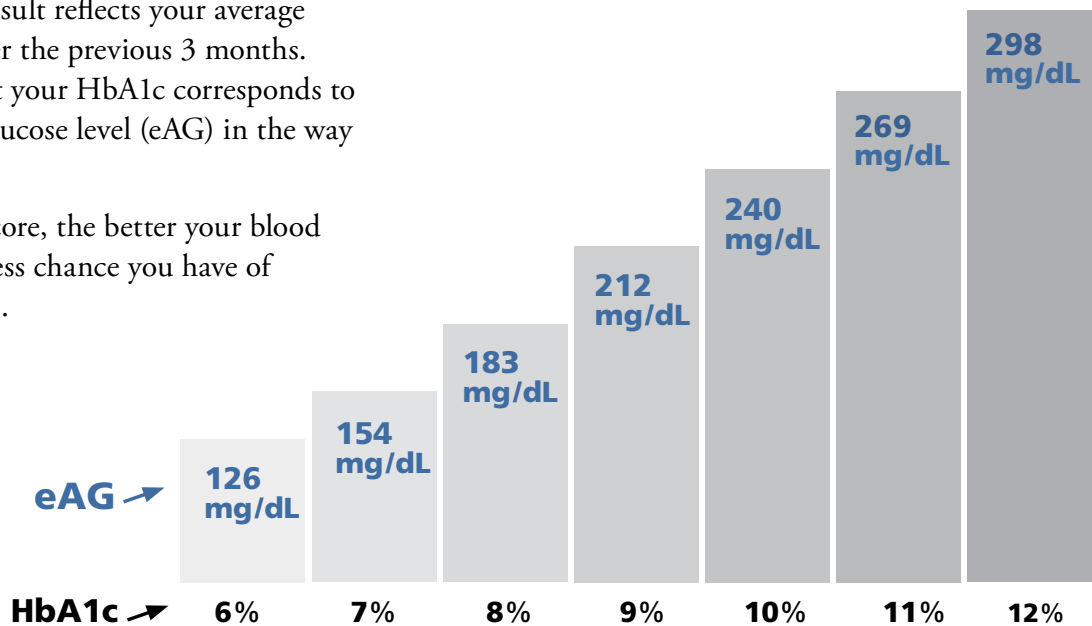
But how well do you understand what your provider is looking for at these clinic visits? **This fact sheet explains 5 key checks and measures your provider uses to gauge your health and treatment.** Learning about them can help you and your provider get on the same page about what's important for your diabetes care — and how well your treatment is working to lower your chance of complications.

1. Your HbA1c (also called A1C)

What? Your provider hopes to see your HbA1c at 7% or lower (or at the target set for you).

Why? Your HbA1c test result reflects your average level of blood glucose over the previous 3 months. Your provider knows that your HbA1c corresponds to your estimated average glucose level (eAG) in the way shown in the chart.

The lower your HbA1c score, the better your blood glucose control and the less chance you have of developing complications.



Here's how your HbA1c results compare with your average fasting blood glucose test results.

2. Your LDL cholesterol

What? Your provider will order a blood test to measure the amount of LDL cholesterol in your blood.

Why? Diabetes tends to raise LDL (“bad cholesterol”) levels, which can cause fatty buildup inside your blood vessels. This in turn increases the risk for heart attack and stroke. In fact, heart attack and stroke are the most common causes of death among people with diabetes.

The American Heart Association no longer recommends a specific target level for LDL cholesterol. Instead, your provider will consider your cholesterol along with your other risk factors. Based on your risk, your provider may prescribe a cholesterol-lowering medication.

3. Your blood pressure

What? Your provider will check your blood pressure at every visit, hoping to see numbers less than 130/80 (or the target set for you).

Blood pressure is the force of blood pressing against the walls of your arteries, much like the pressure of water in a garden hose. You need some blood pressure to move blood through the arteries. But if you have too much pressure inside your arteries — for too long — you have high blood pressure (**hypertension**).

Why? Like high blood glucose and high LDL cholesterol, high blood pressure can damage your blood vessels. It makes your heart work harder and increases your chance for serious health problems throughout your body. The good news? Your provider can recommend treatment to bring it down. This can lower your blood pressure and delay or prevent problems such as heart attack, stroke, eye problems, and kidney disease.

4. Your kidney health and care

What? Your provider will check your kidney function or treatment in one of these ways:

- Testing a sample of your urine to see how well your kidneys are working. One common measure is called a urine microalbumin / creatinine ratio. For this test, the target result is less than 30.
- Making sure you've visited a kidney specialist (nephrologist), if that has been recommended.
- Ensuring you are taking any medication for your kidney health. (Blood pressure medications are often used to support kidney health.)

Why? Kidney disease is, unfortunately, a common complication of diabetes. About 20 % to 40 % of people with diabetes eventually have this complication. Many of these people will need to go on dialysis or have a kidney transplant. Some will die of the disease.

The steps listed above may help your provider prevent kidney disease — or to detect and treat it early on. This can help you live a better and longer life with diabetes.

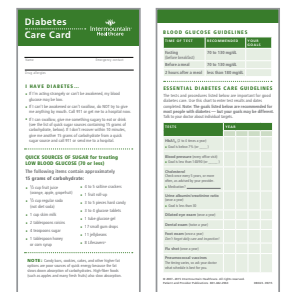
5. Your eye exam

What? Your provider will want to know the date of your most recent dilated eye exam performed by an ophthalmologist or optometrist. The goal is to have this kind of comprehensive eye exam every 1 to 2 years.

Why? People with diabetes are at risk for retinopathy, a serious eye disease linked to high blood glucose and high blood pressure. Early detection and treatment can be the key to preventing blindness — which is why your provider wants to ensure you get regular eye exams.

More to measure? Yes.

Keep in mind that these 5 checks and measures aren't the only things your healthcare provider uses to gauge your diabetes control and treatment. And they're not the only things you should pay attention to, either. Stick to your meal and exercise plan, take your medications, monitor your blood glucose as recommended — and stick to the schedule on your **Diabetes Care Card** for health checks and measures.



To help prevent diabetes complications, keep your eye on the 5...

Talk to your healthcare provider about the checks and measures discussed in this handout. Are you on target? If not, your provider may want to adjust some aspect of your treatment. Use this space to write down notes.

1. **HbA1c:** _____ % Change needed? no / yes
If yes, describe: _____
 2. **LDL:** _____ mg/dL Medication prescribed? no / yes
If yes, describe: _____
 3. **Blood pressure:** _____ Change needed? no / yes
If yes, describe: _____
 4. **Kidney health:** _____ Change needed? no / yes
If yes, describe: _____
 5. **Eye exam:** _____ Change needed? no / yes
If yes, describe: _____
- Other notes and changes: _____

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