

How to identify patients with undetected prediabetes

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One in three U.S. adults has prediabetes and only about 10 percent know they have it. To make it easier to incorporate prediabetes screening and identification into routine patient workflows, the AMA offers tools and resources for physicians and their care teams, as well as online CME to help expand your knowledge in prediabetes and chronic disease treatment.

Through the Measure Accurately, Act rapidly, Partner with patients (M.A.P.) framework, physicians and their staff can design a systematic process that works best for the care team, the practice and the patients.

Measure accurately

Obtain actionable data to assess risk for prediabetes and confirm a diagnosis during routine office visits. During the patient's visit, assess relevant medical, social and family history, as well as other clinical data, such as history of gestational diabetes mellitus, previous laboratory test results and current body mass index.

Physicians and health care team members should also use evidence-based guidelines to identify patients at risk for abnormal glucose based on available data. Order appropriate laboratory testing to diagnose patients with prediabetes or abnormal glucose, and document the diagnosis. Your EHR can be used prevent type 2 diabetes by tracking patients who are due for abnormal glucose screening.

Act rapidly

Once you have identified patients at risk, it is time to act. Engage in making a shared decision with your patient about treatment and formalize a plan. Counsel and educate patients on the risks associated with abnormal glucose levels and available treatment options with an emphasis on lifestyle

change programs. This is also a good time to refer the patient to a National Diabetes Prevention Program (National DPP) lifestyle change program.

Let the patient know that you have referred him or her to a local lifestyle change program. And be sure to share the patient's contact information with the lifestyle change program provider once the patient has agreed.

Partner with patients

Ensure all eligible patients are enrolled in a DPP lifestyle change program. Support your patients in making healthy lifestyle changes and encourage continued participation in a local program. Follow-up regularly to reassess and manage abnormal glucose levels, as well as other relevant clinical data.

Engage and communicate with your local diabetes prevention program or lifestyle change program, and establish a process to receive feedback about your patients' participation.

During your patients' office visits, explore motivating factors that will encourage them to attend their programs. At follow-up visits, order and review blood tests to determine the program's impact, reinforce continued participation and integrate feedback from the program into patients' care plans.

On the patient side, the "Do I Have Prediabetes" campaign, developed through a partnership with the AMA, Centers for Disease Control and Prevention, and the Ad Council, is another helpful resource. The public service campaign aims to reach the many adults who do not know they have prediabetes, offering educational resources that physicians can share with their patients.

Through the campaign, patients can assess their prediabetes risk by taking a one-minute risk test. Viewers are also directed to speak to their physician.

Many resources are available to help integrate these methods into physician practices as part of the AMA's diabetes prevention strategy to help physicians incorporate prediabetes screenings, as well as connecting with lifestyle change programs in their communities, or virtual and online programs.