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Prediabetes is a condition where a person’s blood glucose is high, but not high enough to be diagnosed with type 2 diabetes. What is particularly alarming is that more than one in three adults in the U.S. lives with prediabetes. Yet more than 80% of them don’t even know they have this condition. The good news is that prediabetes doesn’t have to lead to type 2 diabetes—it can be reversible by following proper lifestyle changes and understanding the condition.

The AMA’s What Doctors Wish Patients Knew™ series gives physicians a platform to share what they want patients to understand about today’s health care headlines, especially throughout the COVID-19 pandemic.

Here is a to-do list for patients drawn from this series on what doctors wish patients knew about managing—and reversing—prediabetes, and that places you at increased risk of developing type 2 diabetes, heart disease and stroke.

1. Understand your prediabetes diagnosis
   After receiving a prediabetes diagnosis, it is normal for patients to experience a wide range of emotions—from shock and fear to disbelief. While a prediabetes diagnosis does not automatically mean a patient will develop type 2 diabetes, it is important to take seriously. That’s because prediabetes is real and common, but it can potentially be reversible if you take the right steps.

2. Commit to lifestyle changes
   The alarming state of chronic disease and health inequities exposed during the COVID-19 pandemic has been a wake-up call for people outside the medical community. There is a
growing need for people to commit to making lifestyle changes to help prevent chronic conditions such as type 2 diabetes and heart disease. However, patients are often uncertain of what changes they should make to improve their health and well-being. Learn more about what lifestyle changes patients should make to reduce chronic disease and improve their health.

3 Turn the tide against obesity
The stress and strain of the pandemic has contributed to people not adhering to a healthy eating plan, struggling to remain active and feeling isolated due to the call to stay home and stop the spread of COVID-19. This all adds up, further increasing the risk of severe illness from COVID-19 among people with obesity. But everyone has a role to play in turning the tide against obesity and its inequitable impact. Here are ways patients with obesity can improve their health and well-being during the pandemic.

4 Eat a healthy diet
What you eat plays a leading role in your health and well-being. When someone eats healthy, it helps to protect against many chronic diseases such as heart disease, prediabetes, type 2 diabetes and obesity. But with so many fad diets and food recommendations out there, it can be hard for patients to navigate what to eat and what not to eat.

5 Increase your physical activity
Staying active is one of the best ways to keep your body healthy. It can also improve your overall well-being and quality of life by relieving stress, anxiety, depression, and anger. Maintaining or increasing physical activity is also a key lifestyle change that can help reverse prediabetes and lower blood pressure. But knowing what type of activity to choose—whether it is moderate or vigorous physical activity—is essential for patients to be successful.

6 Maintain a healthy weight
Losing weight is often hard enough to accomplish and maintaining a healthy weight for the long run can seem like an impossible task for many patients, especially during the COVID-19 pandemic when many packed on the pounds in the first year similar to the “freshman 15” in college. Many patients may expect weight loss to happen quickly, but just like weight gain, it does not happen overnight.

The AMA’s?Diabetes Prevention Guide?supports physicians and health care organizations in defining and implementing evidence-based diabetes prevention strategies. This comprehensive and customized approach helps clinical practices and health care organizations identify patients with prediabetes and manage the risk of developing type 2 diabetes, including referring patients at risk to a National Diabetes Prevention Program lifestyle change program based on their individual needs.