

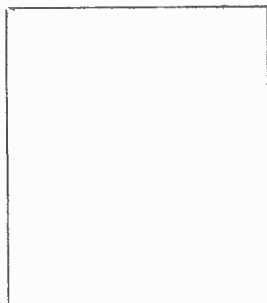
Clinton Herald

12-28-11

A practical guide for all diabetic patients

The incidence of diabetes mellitus continues to rise. There is no family that does not have at least one member with diabetes. The most important risk factor for diabetes is obesity. In the United States, two-thirds of the population is overweight with a BMI 25 of 30 and one-third are obese with a BMI of more than 30. According to the World Health Organization, 400 million people are affected by diabetes mellitus at estimated costs of more than \$820 billion annually.

For DM Type 2, metformin is still the number-one choice for initial treatment but other oral medications are gaining ground. These medications are usually added to metformin if necessary for better blood sugar control. Now they are also found to lower blood pressure and increase weight loss. According to an American Diabetes Association 2016 article, they also have been shown to effectively lower the risk of heart attack, stroke and cardiovascular death among DM Type 2 patients who are at high risk of cardiovascular disease. They also have their own side effects and are



**DR. ANIS
ANSARI**

Health Columnist

considered to be expensive. Many patients require combinations of long-acting insulin and metformin for better control.

Here some very important steps that all diabetics should know and follow:

1. DIABETIC EDUCATION

All new diabetics must see a diabetic educator and dietitian in order to learn more about foods to eat and avoid, checking blood sugar and calorie count, etc.

2. BLOOD SUGAR MONITORING

All patients must check blood sugar as required by a physician in order to adjust the medication dose and frequency. Hemoglobin A1C signifies average blood sugar for the past

three months and should be checked at least once or twice a year.

3. MEDICATIONS

Most diabetics must be started on at least three medications right after the diagnosis: Aspirin, anti-cholesterol medication and Angiotensin converting enzyme inhibitor (ACE) /Angiotensin receptor blocker (ARB) to prevent kidney damage. Aggressive cholesterol treatment is highly emphasized in order to decrease the risk of MI and stroke. The dose of cholesterol medication depends on the risk, not the level of LDL.

4. EXERCISE

Modest exercise is very important in overall management of DM. All diabetics are recommended to exercise five days per week at least 30 minutes each time. Controlling weight and regular exercise contributes enormously to the well-being of diabetics.

5. DIABETIC RETINOPATHY

Everyone must have their eyes checked annually by an ophthalmologist for close monitoring in order to prevent blindness.

6. DIABETIC NEPHROPATHY

Good control of diabetes is important to prevent damage to kidneys. Urine protein, the hallmark of kidney damage, must be monitored annually. A kidney function test must also be routinely performed.

7. DIABETIC NEUROPATHY

Filament testing of both feet is performed to check for neurological damage annually.

More than 40 percent of all diabetics will develop some form of kidney failure in their lifetime. In order to prevent damage to the kidneys, patients must have good control of their diabetes and high blood pressure, be on a low-protein diet and use ACE/ARB medication.

Conclusion: Diabetes is one of the most common menaces in the world. High awareness and better care can prevent a lot of complications in the later part life — including heart attack, stroke, kidney failure, blindness, neuropathy and amputation of the extremities.

Dr. Anis Ansari is chairman of the Department of Medicine at Mercy Medical Center — Clinton.