

# The Essential Guide to Diabetes (1)

## Type 1 and Type 2 diabetes are fundamentally different

### Type 1

- Autoimmune
- Destruction of Beta cells in the pancreas
- Need insulin
- Confirmed with positive antibodies (GAD, IA2 & ZnT8)

### Type 2

- Insulin resistance
- Still have beta cell function
- Strong family history
- Risk factors include obesity, ethnicity, age, family history, lifestyle
- Initially managed with diet/lifestyle interventions, medication and sometimes insulin therapy

### Annual Review – QoF targets include:

- **HbA1c** – measure at least yearly, no more than 3 monthly
- **Blood Pressure** – look at NICE targets and treatments. Target BP for people with diabetes – 140/90 (aim 130/80)
- **Cholesterol** – target cholesterol 5mmol
- **Foot Check** – Ipswich Touch Test. Know what is normal and what is not. Encourage daily check of foot by person.
- **Kidney Function** – blood and urine tests. ACR used with eGFR to establish CKD
- **Diet and Lifestyle** – don't dictate, advise. Discuss different options and support.
- **Smoking Advice** – advice on smoking cessation

## The Essential Guide to Diabetes (2)

### Trio of Treatment Targets

- HbA1c
- Blood Pressure
- Cholesterol

### 15 Healthcare Essentials (Diabetes UK) include 9 key care processes and:

- **Emotional & Psychological support** – if no formal psychologist, refer to local counselling services
- **Ask about sexual dysfunction**
- **Pre-conceptual care and advice**
- **Access to specialist services**
- **Flu vaccination**
- **Diabetes education course**
- **Good care in hospital**

### Use the time wisely

- Focus on the persons goals
- Discuss achievable targets and prioritise
- Use the 'Language Matters' document to support the time spend with them