

For the Patient

The tools found under this section include patient educational materials for patients with prediabetes, information about the National Diabetes Prevention Program (National DPP), and a paper-based screening test your patients may bring to you.

(This section is highlighted in orange and has page numbers ending in P)

- So You Have Prediabetes ... Now What?
- What is the National Diabetes Prevention Program (National DPP)?
- Setting Your Health Goal
- Prediabetes Screening Tests

So You Have PREDIABETES

...Now What?

Congratulations for taking the first step in combating prediabetes, which is, finding out that you have it. You're already ahead of the game, because 9 out of 10 people who have prediabetes, don't know they have it. Now you can do something about it!



What is prediabetes?
Prediabetes means your blood sugar (glucose) level is higher than normal, but not yet high enough to be diagnosed with diabetes.

Prediabetes increases your risk of:



TYPE 2 DIABETES



HEART DISEASE



STROKE

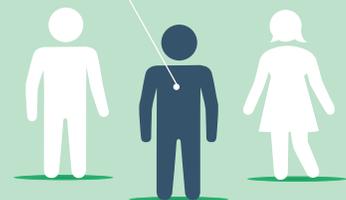
Will I get diabetes?

In 5 years, 15-30% of people with prediabetes will develop Type 2 diabetes. This means that in 5 years, about 15-30 out of 100 people who have prediabetes now will have diabetes. Your own risk for Type 2 diabetes may be even higher, so talk to your doctor.

86
MILLION

American adults—more than 1 out of 3—have prediabetes

1 OUT OF **3**



Why is it important to prevent diabetes? Over time, diabetes can lead to other health conditions like:



BLINDNESS



KIDNEY FAILURE



LOSS OF TOES, FEET, OR LEGS

I don't want to get diabetes, what can I do?



If you have prediabetes, losing weight by:

5 to 7%



EATING HEALTHY



BEING MORE ACTIVE

can cut your risk of getting type 2 diabetes in

HALF



Are there programs that can help me?

Yes! The **National Diabetes Prevention Program (National DPP)** and other structured lifestyle programs can help you to make positive changes to your diet and exercise. See the handout “What is the National Diabetes Prevention Program” for more information about the National DPP.

I don't have time to do the whole National DPP, or one isn't available in my area. What can I do?

Talk to your healthcare provider about other programs that may be available to you. Some of these vary by insurance and location. See also the resources listed below. Some of these are right here in South Carolina! You can also discuss with your doctor whether certain medications could be helpful to reduce your risk of developing diabetes.

What else should I know?

It is important to see your healthcare provider at least once a year for prediabetes. Your doctor will tell you if you need to come more often. If you think someone you care about might also have prediabetes or diabetes, then encourage him or her to get checked as well.



- ✓ eat healthy
- ✓ be more active
- ✓ lose weight

JOIN A CDC-RECOGNIZED
diabetes prevention program



For more information, you can access the following resources:

- Diabetes Advisory Council of South Carolina (DAC) — (website coming soon)
- Prevent Diabetes STAT — <https://preventdiabetesstat.org/for-the-public.html>
- National Diabetes Prevention Program — <https://www.cdc.gov/diabetes/prevention/index.html>
- Let's Go SC! — <http://www.letsosgosc.org/>

Ways to get moving and eat healthier for SC residents

- Choose My Plate — <https://www.choosemyplate.gov/south-carolina>
For how to eat a balanced diet, tips for eating well on a budget

What is the National Diabetes Prevention Program (National DPP)?

National DPP is a nationally recognized lifestyle change program that works, where you'll learn, laugh, share stories, try new things, and build new healthy habits—all while lowering your risk of type 2 diabetes and improving your health.

Key components of the program include:

- Lessons, handouts, and other resources to help you make healthy changes.
- A lifestyle coach, specially trained to lead the program, to help you learn new skills, encourage you to set and meet goals, and keep you motivated. The coach will also facilitate discussions and help make the program fun and engaging.
- A support group of people with similar goals and challenges. Together, you can share ideas, celebrate successes, and work to overcome obstacles. In some programs, the participants stay in touch with each other during the week. It may be easier to make changes when you're working as a group than doing it on your own.

During the first half of the program, you will learn to:

- Eat healthy without giving up all the foods you love
- Add physical activity to your life, even if you don't think you have time
- Deal with stress
- Cope with challenges that can derail your hard work—like how to choose healthy food when eating out
- Get back on track if you stray from your plan—because everyone slips now and then

In the second half of the program, you will enhance the skills you've learned so you can maintain the changes you've made. These sessions will review key ideas such as tracking your food and physical activity, setting goals, staying motivated, and overcoming barriers. You may learn some new information, too. The lifestyle coach and small group will continue to support you.

Program Time Commitment:

The program runs for 1 year.

- During the first 6 months of the program, you will meet about once a week.
- During the second 6 months, you'll meet once or twice a month.

You may think you learned enough in the first 6 months and can skip the second half of the program. But you'd be cheating yourself!

Making lifestyle changes is an ongoing process. Staying in the program for the full year is essential to help you stick to new habits and avoid slipping back into old habits. And if you have not reached your goals in the first half of the program, your lifestyle coach and other group members can help you succeed.

Program Cost:

The cost of participating in a CDC-recognized lifestyle change program varies, depending on location, organization offering it, and type of program (in person or online). Contact the program you're interested in to find out the cost. Some employers and insurance carriers cover the cost of these programs. Check with your employer or insurance carrier to see if a program is covered.

For more information about the National Diabetes Prevention Program visit: <https://www.cdc.gov/diabetes/prevention/index.html>



Setting Your Health Goal

When thinking about what you can do to improve your health, it can be helpful to **write down your goals**. Using the **SMART** method can help you make your goal easier to reach.

SMART stands for:

- **Specific:** Stating what you want to do can help you create a plan to reach that goal. For example, try saying, “I will walk” instead of “I will exercise more”.
- **Measureable:** How much or many of that exercise do you want to do? Picking a number makes it easier to know when you reach your goal. For example, “I will walk one mile”
- **Attainable:** Your goal should take some effort but not be too hard that you can’t reach it. If it’s your first exercise goal, then consider making it fairly easy so you can have an “early win”.
- **Relevant:** Why am I doing this? This is different from person to person, but one reason might be “I want to keep up with my grand-kids”, or “I want to help manage my blood pressure”.
- **Time-bound:** When do you want to accomplish your goal? In a week? A month? A year? Setting a goal in the near future can help you get started sooner. If you have a long-term goal, it can be helpful to make milestones along the way, so you can celebrate success and stay motivated.



HEALTHY FOOD



FITNESS



GOOD SLEEP



NORMAL WEIGHT



NO STRESS



DOCTOR VISITS

Good Examples of SMART goals:

- Starting on Saturday, I will walk 3 times every week for 30 minutes before I go to work
- Starting on Monday I will climb 1 flight of stairs at the office 3 times per workday
- Starting on Monday, I will eat 3 servings of vegetables at least 5 days per week

My SMART goal:

Why I am setting this goal: _____

Consider sharing your goals with your healthcare provider or another member of your healthcare team.

Now that you know how to set goals, explore some resources to help you!



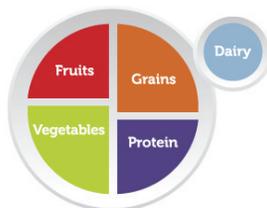
Weight Loss

- Losing weight: Getting Started
https://www.cdc.gov/healthyweight/losing_weight/getting_started.html



Exercise

- What is the single best thing we can do for our health?
<http://ed.ted.com/featured/Mot8KdLT>
- Physical Activity for a Healthy Weight
https://www.cdc.gov/healthyweight/physical_activity/index.html
- Weight-control Information Network: Walking — A Step in the Right Direction
<http://win.niddk.nih.gov/publications/walking.htm>
- Active at Any Size
<http://win.niddk.nih.gov/publications/active.htm>
- Physical Activity for Everyone
<https://www.cdc.gov/physicalactivity/basics/index.htm>



Nutrition

- Build a healthy plate.
<https://www.choosemyplate.gov/>
- Improving Your Eating Habits.
https://www.cdc.gov/healthyweight/losing_weight/eating_habits.html

Prediabetes Risk Test

1. How old are you?

- Younger than 40 years (0 points)
- 40–49 years (1 point)
- 50–59 years (2 points)
- 60 years or older (3 points)

Write your score in the boxes below

2. Are you a man or a woman?

- Man (1 point)
- Woman (0 points)

3. If you are a woman, have you ever been diagnosed with gestational diabetes?

- Yes (1 point)
- No (0 points)

4. Do you have a mother, father, sister, or brother with diabetes?

- Yes (1 point)
- No (0 points)

5. Have you ever been diagnosed with high blood pressure?

- Yes (1 point)
- No (0 points)

6. Are you physically active?

- Yes (0 points)
- No (1 point)

7. What is your weight category?

(See chart at right)

Height	Weight (lbs.)		
4'10"	119-142	143-190	191+
4'11"	124-147	148-197	198+
5'0"	128-152	153-203	204+
5'1"	132-157	158-210	211+
5'2"	136-163	164-217	218+
5'3"	141-168	169-224	225+
5'4"	145-173	174-231	232+
5'5"	150-179	180-239	240+
5'6"	155-185	186-246	247+
5'7"	159-190	191-254	255+
5'8"	164-196	197-261	262+
5'9"	169-202	203-269	270+
5'10"	174-208	209-277	278+
5'11"	179-214	215-285	286+
6'0"	184-220	221-293	294+
6'1"	189-226	227-301	302+
6'2"	194-232	233-310	311+
6'3"	200-239	240-318	319+
6'4"	205-245	246-327	328+
	1 Point	2 Points	3 Points
	You weigh less than the 1 Point column (0 points)		



Total score:

Adapted from Bang et al., Ann Intern Med 151:775-783, 2009. Original algorithm was validated without gestational diabetes as part of the model.

If you scored 5 or higher

You are at increased risk for having prediabetes and are at high risk for type 2 diabetes. However, only your doctor can tell for sure if you have type 2 diabetes or prediabetes, a condition in which blood sugar levels are higher than normal but not high enough yet to be diagnosed as type 2 diabetes. **Talk to your doctor to see if additional testing is needed.**

Type 2 diabetes is more common in African Americans, Hispanics/Latinos, American Indians, Asian Americans, and Pacific Islanders.

Higher body weight increases diabetes risk for everyone. Asian Americans are at increased risk for type 2 diabetes at lower weights (about 15 pounds lower than weights in the 1 Point column).

You can reduce your risk for type 2 diabetes

Find out how you can reverse prediabetes and prevent type 2 diabetes through a **CDC-recognized lifestyle change program** at <https://www.cdc.gov/diabetes/prevention/lifestyle-program>.

Risk Test provided by the American Diabetes Association and the Centers for Disease Control and Prevention.



Prueba de riesgo de prediabetes

1. ¿Qué edad tiene?

- Menor de 40 años (0 puntos)
- 40 a 49 años (1 punto)
- 50 a 59 años (2 puntos)
- 60 años o más (3 puntos)

Escriba su puntaje en las casillas de abajo

2. ¿Es hombre o mujer?

- Hombre (1 punto)
- Mujer (0 puntos)

3. Si es mujer, ¿le diagnosticaron alguna vez diabetes gestacional?

- Sí (1 punto)
- No (0 puntos)

4. ¿Tiene diabetes su madre, padre, algún hermano o hermana?

- Sí (1 punto)
- No (0 puntos)

5. ¿Le diagnosticaron alguna vez presión arterial alta?

- Sí (1 punto)
- No (0 puntos)

6. ¿Se mantiene físicamente activo?

- Sí (0 puntos)
- No (1 punto)

7. ¿En qué categoría de peso está?

(Vea la tabla a la derecha)

Estatura	Peso (libras)		
4'10"	119-142	143-190	191+
4'11"	124-147	148-197	198+
5'0"	128-152	153-203	204+
5'1"	132-157	158-210	211+
5'2"	136-163	164-217	218+
5'3"	141-168	169-224	225+
5'4"	145-173	174-231	232+
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6'2"	194-232	233-310	311+
6'3"	200-239	240-318	319+
6'4"	205-245	246-327	328+
	1 punto	2 puntos	3 puntos
	Usted pesa menos de lo que figura en la columna de 1 punto (0 puntos)		

Puntaje total:

Adaptado de Bang et ál., Ann Intern Med 151:775-783, 2009. El algoritmo original se validó sin incluir la diabetes gestacional como parte del modelo.

Si obtuvo 5 o más puntos

Usted está en mayor riesgo de tener prediabetes y tiene un alto riesgo de presentar diabetes tipo 2. Sin embargo, solo su médico le puede decir con seguridad si tiene diabetes tipo 2 o prediabetes, una afección en la que los niveles de azúcar en la sangre son más altos de lo normal, pero aún no lo suficiente como para dar un diagnóstico de diabetes tipo 2. **Hable con su médico para ver si necesita pruebas adicionales.**

La diabetes tipo 2 es más común en personas afroamericanas, hispanas o latinas, indoamericanas, asiáticoamericanas, y nativas de las islas del Pacífico.

Un mayor peso corporal aumenta el riesgo de diabetes en todas las personas. El aumento del riesgo de diabetes tipo 2 en las personas asiáticoamericanas se da a menores pesos (alrededor de 15 libras menos) que los reflejados en la columna de 1 punto.

Usted puede reducir su riesgo de presentar diabetes tipo 2

Averigüe cómo puede revertir la prediabetes y prevenir la diabetes tipo 2 por medio de un **programa de cambio de estilo de vida reconocido por los CDC** en <https://www.cdc.gov/diabetes/prevention/lifestyle-program>.

Prueba de riesgo provista por la Asociación Americana de la Diabetes y los Centros para el Control y la Prevención de Enfermedades.

