

DIABETES PREVENTION



“I have been told that I have pre-diabetes and am at risk for developing Type 2 diabetes. What does this mean in terms of my health, diet, and lifestyle?”

Receiving any diagnosis can be overwhelming and frightening. This website tab is designed to answer some of those basic questions about pre-diabetes. If you have further questions, you can review and discuss your specific questions with your doctor.

What is pre-diabetes?

Pre-diabetes is fundamentally a warning, or “pre-diagnosis,” that you are at higher risk for developing diabetes. This means that your blood glucose level (blood sugar level) is higher than normal, but is not high enough to be considered diabetes.

- Normal: <100 mg/dL
- Pre-diabetes: 100-125 mg/dL
- Diabetes: >126 mg/dL

The great news is that you can prevent pre-diabetes from developing into Type 2 diabetes, but this takes some work.

By committing to eating a healthy diet, losing weight and staying at that weight, and being physically active, you can help bring your blood glucose level back into the normal range.

What causes pre-diabetes?

Pre-diabetes develops when your body begins to have trouble processing insulin. Insulin is a hormone that is needed to transport glucose—your body’s energy source—into the cells via the bloodstream. In pre-diabetes, your body either does not make enough insulin or it does not process it well (also called insulin resistance).

If you do not have enough insulin or if you are insulin resistant, you can build up too much glucose in your blood, leading to higher-than-normal blood glucose levels.

How is pre-diabetes detected?

To diagnose pre-diabetes, two tests are usually performed:

- **Fasting plasma glucose test (FPG):** This test is usually conducted in the morning, after you have fasted for at least 8 hours. If your FPG is between 100 and 125 mg/dL, you may have pre-diabetes. If your blood glucose level is above 126 mg/dL with the FPG test, you may have diabetes.
- **Oral glucose tolerance test (OGTT):** Similar to the FPG, you must fast for at least 8 hours before the OGTT. On the day of the test, your blood glucose level is assessed at the beginning of the appointment. Then, you will drink 75 g of a very sugary mixture. Two hours later, your blood glucose level will be retaken. If your blood glucose is between 140 and 199 mg/dL after

drinking the sugary mixture, you have pre-diabetes. If your blood glucose level is above 200 mg/dL, you may have diabetes.



Eat well

Create a healthy meal plan consisting of fresh fruits and vegetables (including leafy greens), avoid excessive starches (carbohydrates), and eat lean proteins (chicken, fish). The goal of the meal plan is to control your blood glucose level and keep it in the healthy, normal range.



Exercise

The goal is to exercise at least 30 minutes per day five days per week. You can begin slowly, and work your way up to 30 minutes over the course of a week or two.



Lose weight

If you are overweight, you should get started on a weight-loss program. Losing 5% to 10% of your weight can significantly reduce your risk for developing Type 2 diabetes.



Metformin

If you have many risk factors for pre-diabetes, the prescription medication metformin may be recommended to prevent development of Type 2 diabetes. It works by keeping the liver from making more glucose when you do not need it, thereby keeping your blood glucose level in a better range.

Additional Resources:

American Diabetes Association (ADA):

www.diabetes.org

National Diabetes Information Clearinghouse (NDIC)

www.diabetes.niddk.nih.gov