

For Immediate Release

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American Diabetes Association® Releases 2016 Standards of Medical Care in Diabetes

ALEXANDRIA, Va. (Dec. 22, 2015) – New obesity management recommendations for the treatment of type 2 diabetes were published as a part of the American Diabetes Association’s 2016 Standards of Medical Care in Diabetes today in *Diabetes Care*. The annually updated guidelines provide health care providers with all components of diabetes care, general treatment goals, and tools to evaluate quality care. Among its updates, the Standards of Care outline a tiered approach to obesity management, including lifestyle intervention, pharmacotherapy, and bariatric surgery.

The 2016 Standards of Care also tailor diabetes treatment to improve care among vulnerable populations. Clinicians are given guidance on treating ethnic, cultural, gender, socioeconomic differences and disparities. There is also guidance regarding food insecurity, cognitive dysfunction, mental illness, and patients with HIV who also have diabetes.

“Diabetes management requires individualized, patient-centered, and culturally appropriate strategies. Clinical practice guidelines are important for improving population health, but for the best outcomes, diabetes care has to be individualized for each patient,” said Jane Chiang, MD, senior vice president, medical and community affairs, American Diabetes Association. “The new obesity management and vulnerable population sections are two examples where individualized care is so important. These interventions can help reduce the risk of long-term complications and improve diabetes outcomes.”

Among other updates, the scope for treating different populations with diabetes has expanded. New recommendations address diabetes self-management education and support, psychosocial issues and treatment for youth with type 2 diabetes. An in-depth section on older adults provides a framework for treatment based on cognitive impairment, coexisting chronic illnesses, and functional status. For women of child-bearing years, there are new recommendations on pregestational diabetes, gestational diabetes, and diabetes management in pregnancy.

The Association updated its atherosclerotic cardiovascular disease recommendations. Clinicians should consider prescribing aspirin therapy to women age 50 and older who have at least one additional major risk factor, such as family history of premature atherosclerotic cardiovascular disease, hypertension,

smoking, dyslipidemia, or albuminuria, and are not at increased risk of bleeding. To manage lipids, adding ezetimibe to moderate-intensity statin may provide additional cardiovascular benefits for select people with diabetes.

The Association recognizes the important role of technology in managing diabetes. A new recommendation states that people who use continuous glucose monitoring and insulin pumps should have continuous access after they turn 65 years of age. People at risk for developing type 2 diabetes should consider the use of new technology, such as Internet-based social networks, distance learning, and mobile applications, to effectively modify behaviors to prevent diabetes.

“The Association’s Standards of Medical Care in Diabetes are a living document that is revised and updated annually to address the needs of patients and their providers and to shape diabetes care and policy both nationally and internationally,” said William H. Herman, MD, MPH, Professor of Medicine and Epidemiology at the University of Michigan and chair of the Association’s Professional Practice Committee. “People with diabetes, their families, and their health care providers are constantly challenged to achieve diabetes treatment goals. It is an increased challenge for health care providers to address socioeconomic disparities, cultural differences, and needs dictated by factors as diverse as cognitive impairment, cardiovascular disease, HIV infection, and food insecurity when effectively treating diabetes. In addition, they must continually integrate new scientific knowledge into a comprehensive framework for diabetes management. The Standards of Care cohesively outline goals for effective diabetes treatment in one place and as a result make diabetes management more accessible.”

The following materials are available today on professional.diabetes.org/cpr:

- The full Standards of Care, available online today and in print as a supplement to the January 2016 issue of *Diabetes Care*.
- The abridged version of Standards of Care, which highlights the most clinically relevant recommendations for primary care providers available online today and in print *Clinical Diabetes* Jan. 15, 2016.
- A webcast with Robert Ratner, MD, chief scientific and medical officer, American Diabetes Association, which identifies the Standards of Care recommendations to classify, diagnose, and treat prediabetes and diabetes. Health care professionals who participate in the webcast are eligible for .75 CE credit. The webcast is available today on online until Dec. 31, 2016.

The American Diabetes Association is leading the fight to Stop Diabetes® and its deadly consequences and fighting for those affected by diabetes. The Association funds research to prevent, cure and manage diabetes; delivers services to hundreds of communities; provides objective and credible information; and gives voice to those denied their rights because of diabetes. For the past 75 years, our mission is to prevent and cure diabetes and to improve the lives of all people affected by diabetes. For more information please call the American Diabetes Association at 1-800-DIABETES (800-342-2383) or visit diabetes.org. Information from both these sources is available in [English](#) and [Spanish](#).

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