

What doctors want patients to know about a prediabetes diagnosis

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Sara Berg, MS

News Editor

After receiving a prediabetes diagnosis, it is normal for patients to experience a wide range of emotions—from shock and fear to disbelief. While a prediabetes diagnosis does not automatically mean a patient will develop type 2 diabetes, it is important to take seriously. That’s because prediabetes is real and common, but it can potentially be reversible if you take the right steps. Since prediabetes can be confusing, one physician took time to clear things up.

The AMA’s [Diabetes Prevention Guide](#) supports physicians and health care organizations in defining and implementing evidence-based diabetes prevention strategies. This comprehensive and customized approach helps clinical practices and health care organizations identify patients with prediabetes and manage the risk of developing type 2 diabetes, including referring patients at risk to a National Diabetes Prevention Program lifestyle change program based on their individual needs.

In a recent discussion, Kate Kirley, MD, a family doctor who is the director of chronic disease prevention at the AMA, shared what she and her physician colleagues want patients to know about a diagnosis of prediabetes.

Prediabetes is preventable

About 88 million U.S. adults have prediabetes, which “is the condition where a person’s blood glucose levels are higher than normal, but not yet high enough to qualify for a diagnosis of type 2 diabetes,” Dr. Kirley explained, noting that “it’s a sign that someone’s body is already not metabolizing glucose normally, but it’s not a full-on diagnosis of

diabetes.”

Since prediabetes is not a diagnosis of type 2 diabetes, patients should care “because there are things that they can do to prevent full-on developing type 2 diabetes,” she said. “And it’s actually a really good time to think about healthy changes that people can make to both prevent diabetes, but also improve their health in general.”

Most don’t know they have it

When it comes to prediabetes, there are no clear symptoms. That means many people may prediabetes and not even know it.

It is known that “about one-third of adults in the U.S. are estimated to have prediabetes,” said Dr. Kirley. “And we know from studies that only about 15% of people who have prediabetes are aware that they have it.”

That means “about 85% of people who have prediabetes don’t even know they have it,” she added.

Know the risk factors

Because there are no easy to identify symptoms of prediabetes, “that’s why it’s important for people to ask their doctor about it and go for their regular health maintenance when their doctor suggests that they come in,” said Dr. Kirley. “And if people have specific risk factors like being 40 or older, and having overweight or obesity, those are people who should be screened for this condition with a blood test since they probably don’t have symptoms.”

Individuals “can determine some of their risks for having prediabetes—or even undiagnosed type 2 diabetes—by completing the risk test at doihaveprediabetes.org,” she said. “But to really confirm if you have prediabetes, you need to see your doctor and get a blood test.”

Discover [what doctors want patients to know about obesity during the pandemic](#).

You're not destined to get diabetes

“Prediabetes is a little bit of a misleading term because it sort of makes it sound like it's always the step before diabetes and you're destined to develop diabetes,” said Dr. Kirley. “That is one thing we like people to understand is that prediabetes doesn't mean that you are 100% destined to develop type 2 diabetes.”

However, “it's probably the single most—and I'm talking doctor language now—predictive risk factor,” she said, emphasizing that “it's the single factor that tells us the most about somebody's risk of eventually developing type 2 diabetes.

“It is that warning that your blood glucose is already being handled in an abnormal way by your body,” Dr. Kirley added.

It is treatable

The good news is that “prediabetes is treatable and oftentimes even reversible,” said Dr. Kirley, noting “there are multiple treatments available to people to reduce their risk of developing type 2 diabetes and to improve their health.”

“Those treatments include support to make healthy lifestyle changes through an intensive lifestyle change program—like the diabetes prevention program—as well as the medication metformin, which can help prevent type 2 diabetes,” she said. “And these are options that people can talk to their doctors about.”

One size does not fit all

“There's not a one size fits all approach for preventing type 2 diabetes, which is a good thing—there are different options available,” Dr. Kirley said. “For some people, medication does make sense for them because of where they are in their lives.

“For other people, the thought of taking the medication every day is not appealing to them,” she said. “That's why it's great that we have options like the lifestyle change program that's

part of the National Diabetes Prevention Program that can support people in making healthy lifestyle changes.”

Read about [how patients can start—and stick with—key lifestyle changes](#).

Group support is key

“Some people can be pretty successful with making healthy lifestyle changes on their own,” said Dr. Kirley, noting that “part of it is trying to lose some weight” because “trying to lose 5% to 7% of somebody’s body weight has been shown to decrease the risk of developing type 2 diabetes.

“However, most people benefit from the support of a program like an intensive lifestyle change program. That’s because it has multiple behavior supports in it,” she added.

“There’s the educational piece about what to do in terms of nutrition, physical activity, stress and sleep, but there’s also group support components to it—there’s guidance around how to monitor yourself and continue to improve in the long term.”

“There’s a whole lot that somebody can get out of participating in a program that they might not get from doing things on their own,” said Dr. Kirley. “But if they prefer to do something a little bit more on their own, virtual programs can be a really good option for that because people can virtually get access to a trained lifestyle coach who can coach them a little more on a one-on-one basis and still connect them with all the resources associated with the program.”

This isn’t about extreme changes

When it comes to prediabetes, “this is not about dramatic extreme lifestyle changes,” said Dr. Kirley. “This is about healthier eating habits and physical activity habits—there’s no really single extreme diet that’s recommended.”

“It’s not about putting these highly intensive workouts into your routine. It’s not about losing 50 pounds for most people,” she said. “It’s about learning healthy nutrition principles in general and how to actually put those into practice in real life. It’s about shooting for 5%

weight loss.”

“The nutrition changes are not as extreme as people imagine and it can fit into people’s lifestyles, into their personal preferences and their cultural traditions,” said Dr. Kirley. “So, when we talk about lifestyle changes, we’re not talking about extreme changes. We’re talking about goals that are totally attainable for many people.”

Discover [six lifestyle changes patients with obesity and prediabetes should make](#).

Registered dietitians can help too

“There are definitely some healthy nutrition principles that really apply to everybody,” Dr. Kirley explained. “And then there may be some more nuanced things that can help individuals.

“That can be where seeing a registered dietitian for medical nutrition therapy can also be a really helpful support and treatment option for people with prediabetes because then they can get some customized or individualized nutritioguidance from a nutrition expert,” she added. “And that’s a really helpful preventive intervention as well for people with prediabetes.”

Read about [what doctors want patients to know about healthy eating](#).

Don’t forget about physical activity

“When it comes to weight management there is probably some credence to the fact that—for a lot of people—the nutrition piece more heavily contributes to weight than the physical activity piece,” Dr. Kirley said. “But when we think about health overall, physical activity is really important.

“There are a lot of health benefits associated with physical activity, even beyond losing weight,” she added. “So even if people don’t lose weight, but they become more physically active, there are clear health benefits.”

“And when it comes to preventing diabetes and thinking about people who have prediabetes, improving physical activity is a really important piece,” Dr. Kirley explained.

You are not alone

“So many adults have prediabetes and with the widespread availability of the lifestyle change program, people can find the type of support that feels comfortable for them—they can get expert advice from a health coach and expert advice from their physician, always,” Dr. Kirley said. “Then also that group and peer support from the program too.”

It helps “so that you don't feel like you're going it alone and you can learn along the way with people who become friends and are going through the same thing that you are going through,” she said. That support allows “you to figure out how to navigate some of those changes together.”

It doesn't require a lot of time

“For some people, having medication as an option is important because we know not everybody can commit to an intensive lifestyle change program at any given point in their life,” Dr. Kirley said. “There's maybe easier times to do this, but for people who want to participate in the beginning of the program, it's usually about an hour a week for about four to six months.

“And then after that, it's maybe an hour every other week for another six months,” she added, noting that it doesn't require a lot of time out of the day, “probably a fraction of the time that many people spend scrolling through social media.”