

TYPE 2 DIABETES OUTPATIENT MANAGEMENT

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TYPE 2 - INSULIN RESISTANCE

RISK FACTORS

HTN
Obesity
Family history
Pre-diabetes
Metabolic Syndrome

SYMPTOMS

Polyuria
Polydipsia

DIAGNOSTIC WORKUP

PREDIABETES

5.7 - 6.4%

100 - 125 mg/dL

100 - 199 mg/dL

DIABETES

≥6.5%

≥126 mg/dL

≥200 mg/dL

HbA1C

FASTING

2H OGTT

PHYSICAL EXAM

ACANTHOSIS NIGRICANS

-VELVETY HYPERPIGMENTED SKIN
INSULIN RESISTANCE

METABOLIC SYNDROME (≥ 3/5)

- ABDOMINAL OBESITY
- HTN
- LOW HDL
- HIGH FAST GLUCOSE
- HIGH TRIGLYCERIDES

SURVEILLANCE

NEPHROPATHY - Urine Microalbumin/Cr Ratio (UACR)

RETINOPATHY - Yearly Ophthalmologist Exam

NEUROPATHY - Yearly Podiatrist Exam
- pulses, ulcers, monofilament

LANDMARK STUDIES

Target A1C = <7%

UKPDS 33 Trial, 1998

HbA1c <7% lowers the likelihood of microvascular complications.

ACCORD TRIAL, 2008

Intensive HbA1c in T2DM patients increases mortality compared to standard targets.

