



**Diabetes: Reducing the Risk of Chronic Complications**

**PATIENT/FAMILY INFORMATION SHEET**

**What are possible chronic complications from diabetes?**

Poorly controlled diabetes, type 1 and type 2, can lead to chronic complications. These include:

<p><b>Atherosclerosis</b> - Cholesterol build-up in blood vessels. The risks of heart attack, peripheral vascular disease, and stroke increase.</p>	<p><b>Neuropathy</b> – Damage to nerve fibers, often seen in feet and legs. Nerve damage combined with circulatory changes increase the risk of lower limb amputation.</p>
<p><b>Retinopathy</b> – Damage to the small blood vessels in the eyes. Over time, this damage can result in blindness if not detected and treated.</p>	<p><b>Nephropathy</b> - Damage to the small blood vessels in the kidneys. Over time, this damage can lead to kidney failure and dialysis.</p>

**What can I do to reduce my risk of chronic complications from diabetes?**

The *ABC*'s of good diabetes control include:

**A1c** or glycohemoglobin – Usually measured 4 times each year, this blood test reflects a 2-3 month average of blood glucose. The normal range is 4 to 6%. The recommended target for an individual with diabetes should be less than 6.5 to 7%.\*

**Blood pressure** – Blood pressure should be less than 130/80.

**Cholesterol** – Blood lipid targets for individuals with diabetes are as follows:

Blood Lipid	Target
Total cholesterol	Less than 200 mg/dl
HDL cholesterol ("Good" cholesterol)	Men: more than 40 mg/dl Women: more than 50 mg/dl
LDL cholesterol ("Bad" cholesterol)	Less than 70 mg/dl
Triglycerides	Less than 150 mg/dl

\*The American Diabetes Association recommends an A1c level of less than 7%. The American Association of Clinical Endocrinologists recommends a level of less than 6.5%.



**Are there other steps I can take to reduce the risk of chronic complications?**

Additional diabetes self-management skills that help reduce the risk of chronic complications include:

- Monitoring blood glucose at home. Your health care provider can recommend when and how often to test your blood glucose.
- Taking all medications as prescribed by your physician. It is very common that someone with diabetes will be on several medications for blood glucose control as well as for blood pressure and blood lipid control.
- Following the meal plan you, your registered dietitian, and/or certified diabetes educator create.
- Performing daily foot care and self-inspections. This can greatly decrease the risk of infections that can lead to amputation. Wearing properly fitted shoes and slippers helps protect your feet.
- Engaging in regular physical activity. Check with your physician before starting a new exercise program or increasing your current physical activity level.
- Meeting with your physician for regular check-ups and screenings. These include screenings for retinopathy and nephropathy.
- *Do not smoke.*

**How can I get more information?**

If you have questions about your diabetes self-management, you may contact the following resources:

Organization	Phone
Greenwich Hospital Weight Loss & Diabetes Center	203.863.2939
Greenwich Hospital Diabetes Education Specialist	203.863.3929
American Diabetes Association	800.342.2383
Web Resources	
☐ American Diabetes Association <a href="http://www.diabetes.org">www.diabetes.org</a>	

Reference: Diabetes Care 28 (1):S4-S36, 2005.

*For more Patient Fact Sheets, see the Greenwich Hospital web site at [www.greenwichhospital.org](http://www.greenwichhospital.org) and click on Patient Education*