
The ABCs of Diabetes

Work with your diabetes care team to make a plan that helps you manage your diabetes. Your diabetes care team can include you and your:

- Doctor (primary care or endocrinologist)
- Nurse
- Registered dietitian nutritionist (RDN)
- Diabetes educator
- Eye doctor (optometrist or ophthalmologist)
- Foot doctor (podiatrist)
- Pharmacist
- Dentist
- Social worker
- Therapist
- Personal trainer

Together, you'll keep track of the ABCs of diabetes:

A is for A1C

Your A1C test tells you your average blood glucose for the past two to three months. Your health care provider may call this your estimated average glucose, or eAG. The eAG gives your A1C results in the same units (mg/dL) as a blood glucose meter.

B is for blood pressure

Your blood pressure numbers tell you the force of blood inside your blood vessels. When your blood pressure is high, your heart has to work harder.

C is for cholesterol

Your cholesterol numbers tell you the amount of fat in your blood. Some kinds of cholesterol can raise your risk for a heart attack or stroke.

What are the goals of treating diabetes?

The two goals of diabetes treatment are to make sure you feel well day-to-day and to prevent or delay long-term health problems.

The best way to reach those goals is by:

- Taking medications, if your doctor prescribes them.
- Planning your meals—choosing what, how much, and when to eat.
- Being physically active.

If you are not reaching your goals, your health care team will help you change your plan as needed to stay on target. You can learn more about the ABCs of diabetes below:

A1C/eAG

What is the suggested target for A1C/eAG?

The target for A1C as recommended by the American Diabetes Association® (ADA) for most adults with diabetes is 7% (eAG of 154 mg/dL). Your doctor may give you a higher or lower target based on how old you are and other factors. Your risk of long-term complications is much lower when your A1C is at or below your target.

What does my A1C/eAG result mean?

Usually, your A1C reflects general trends you see with your day-to-day blood glucose checks. Sometimes, however, your A1C result may seem higher or lower than you expected. That may be because you aren't checking your blood glucose at times when it's very high or very low.

To interpret your result, first find your A1C number on the left. Then read across to learn your average blood glucose for the past two to three months.

Your A1C Number	Your Average Blood Glucose for the Past 2 to 3 Months
6.0%	126 mg/dL
6.5%	140 mg/dL
7.0%	154 mg/dL
7.5%	169 mg/dL
8.0%	183 mg/dL
8.5%	197 mg/dL
9.0%	212 mg/dL
9.5%	226 mg/dL
10.0%	240 mg/dL
10.5%	255 mg/dL

If your A1C/eAG is different from what you expect, talk to your doctor.

Your Blood Pressure Numbers

- The first number is the pressure as your heart beats and pushes blood through the blood vessels. It's called the "systolic" pressure.
- The second number is the pressure when the vessels relax between heartbeats. It's called the "diastolic" pressure.

! It is important to know your blood pressure number and track it.

Blood pressure

An important part of taking care of yourself is managing your blood pressure. High blood pressure, also called hypertension, raises your risk for heart attack, stroke, eye problems, and kidney disease.

What is high blood pressure?

When a member of your diabetes care team checks your blood pressure, they report it as two numbers, such as 120/80. You'll hear them say this as "120 over 80." Both numbers are important.

High blood pressure is a condition that won't go away without treatment.

What should my blood pressure target be?

The ADA recommends a target blood pressure below 140/90 for people with diabetes. When you keep your blood pressure below 140/90, you'll help lower your risk for diabetes complications.

