

How To Impact Your Patients Lifestyles in 20 Minutes!

Part 3

Special Feature by Stephen Freed, RPh, Diabetes Educator, Publisher

I recently traveled to 15 small towns in central Illinois and provided diabetes education for over 350 patients.

Because I only had 20 minutes with each patient, I had to be short, precise and to the point. One of the first things we discussed was the A1c test and the results.

I asked them if they understood what the A1c number meant? Over 98% could not answer the question. I then proceeded to ask them, when was the last time they checked their blood glucose? When they replied that they had checked their blood glucose yesterday morning. I then asked them at what time? After they replied, for example at 7AM, I then asked them what their blood glucose was at 8AM and they said they didn't check it at 8AM. I then asked them what about 10, 11, 12, 1, 3PM, 6PM, 3AM, etc. They replied that they didn't know because they only checked it once that day.

I asked them what that one reading meant as far as their diabetes control. They usually told me that from that reading they felt that they were in good, fair or bad control.

I explained the information they obtained from that one reading had little relevance as to their diabetes control and that if they checked their blood glucose one time that day, it was their blood glucose for that one second in time. Since there are almost 100,000 seconds in a day and they only knew what their blood sugar was for that one second, what did that tell you about your diabetes control?

They began to understand that one reading was a useless number as far as letting them know how well they were doing. That number had nothing to do with their diabetes control as far as the big picture. Only an A1c could do that.

When told the reading they got first thing in the morning had little to do with what they had eaten the night before, most of the patients were surprised. I explained that prior to them awakening, their bodies were providing the necessary glucose to give them the energy to get up and get dressed and have breakfast which would provide them the energy they needed for the morning. When you have diabetes, you don't have enough insulin working to prevent the liver from releasing glucose and it over releases glucose into your blood.

To help bring this point home I used a the chart called:

Your Quality of Life Number (available at the end of this feature)

The *Quality of Life Number* also known as the A1c tells them how well they are controlling their diabetes. The A1c tells them their risk for getting all the complications from diabetes, and it also tells if we are more susceptible to every other disease and chronic illness

When your A1c is above normal, it decreases our immune system and leaves us more susceptible to just about every disease and chronic illness imaginable. The A1c result will determine their quality of life as they get older.

They learned it was their report card, it represented their grade as to their control. And also their doctors grade as to his ability to help them with their diabetes.

Explaining that Diabetes is a Lifestyle disease and they are the only ones with complete control was eye opening to many patients.

Since their A1c number is important for them to understand should be as close to normal as possible, every time they see their doctor, they need to request the result and discuss with their doctor, how to work together to get it down to normal. They needed to track that number over time to see how well they are controlling their diabetes.

Diabetes is a progressive disease, and if they did nothing it would get worse over time and if they worked hard at maintaining a good A1c, it would help prevent the complications.

Together we reviewed with them their A1c number and what it meant as far as their blood glucose levels. Using the *Quality of Life Number* chart we equated this to their average glucose and explained this was an average so some readings had to be higher in order to have this average. If the patient had never seen higher than their average readings I explained they were probably testing at the wrong times.

Since most of the patients knew that the diabetes causes the most damage to your body when it is high. We had to help them understand when are their blood sugars the highest, and when asked they mainly answered “after your eat”.

It is amazing to see the look on a patients face when they realize that they are telling me diabetes causes the most damage when their blood sugars are high and yet they never check it then.....

Continued

To get the “Do You Know Your Quality of Life Number” form that I used, click here [Your Quality of Life Number](#)

In 2 weeks: Tips to getting your patients to monitor more often.

Comments or questions: send to publisher@diabetesincontrol.com

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