

How To Impact Your Patients Lifestyles in 20 Minutes!

Part 4 – How to get patients to increase BG monitoring
Special Feature by Stephen Freed, RPh, Diabetes Educator, Publisher

I recently traveled to 15 small towns in central Illinois over 28 days and provided free instant a1c tests and diabetes education for over 350 patients.

After the education program we asked them to fill out a survey and 2 of the questions and results follow:

Prior to today, how many times a day were you checking your blood glucose:

Response was an average of 1.25 times per day

After today, how many times a day will you check your blood glucose:

Response was 2.95 times a day.

As you can see, we were able to make a major change in how many times they monitor their blood sugars. Because I only had 20 minutes with each patient, I had to be short, precise and to the point. In this special feature, I will review with you the information I supplied to the patient that caused them to increase their blood glucose monitoring.

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 or they were not testing as often as they should.

Because most of the patients were only testing in the morning and seeing only the lowest numbers, I asked them if I could ask them two questions?

First question: When do you think diabetes causes most of the damage, to your body, when your blood sugars are normal or when they are high?

Everyone answered, when they are high!

Second question: When do you think your blood sugars are higher? Before you eat or after you eat?

Everyone answered, after you eat!

Reply: So, you are telling me that your blood sugars are highest after you eat and that's when they are causing most of the damage and you don't have a clue? Is that correct?

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

Most reply that their doctors never explained it to them.

I then replied that most doctors like the fasting blood sugars because the morning reading is not affected in general by the foods we are eating and it lets them know how well their livers are working in releasing glucose.

The readings 2 hours after they eat are directly related to the foods that we eat and since some doctors are not formally trained in nutrition, it makes it difficult for them to talk about the results you see 2 hours after eating.

That the reading 2 hours after eating will tell them 3 important things:

First, it will let them know if they ate too much, which they have complete control over.

Second it will tell them if they ate the wrong foods, which they also have complete control over.

Thirdly, it will tell them if their insulin or oral medications are working.

This could be of great value in adjusting the physician's treatment program and successful blood sugar control for the patient.

I also let them know that there are new drugs that only work on their blood sugars after they eat, and if they don't monitor their blood sugars after they eat, their doctor will not know if he should prescribe the new medications. The more information they give their doctors or educators, the more options are available to them. Checking their blood sugars 2 hours after eating will educate them and allow them to make changes to their diet that will have a direct impact on their control.

They then ask when should I monitor my blood sugars? I let them know that probably after their largest meal and then maybe vary the times and check it occasionally after breakfast and lunch. That they will learn something every time they check their blood sugars after eating, like what foods effect their blood sugars the most and those that do not.

Most patients agree to check more often...definitely an advantage in prescribing the proper treatment program for your patient and monitoring their food intake.

Continued.....

In Part 5 we will talk about counting carbohydrates

Comments or questions: send to publisher@diabetesincontrol.com

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