

Free e-learning resource

Early pharmacological treatment in type 2 diabetes

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Raoul is a 49-year-old gentleman of Asian ethnic origin recently diagnosed with type 2 diabetes. His HbA_{1c} is 73 mmol/mol (8.8%).

What HbA_{1c} target would you aim for with Raoul? Would you suggest he start on pharmacological treatment for his diabetes straight away?

Andrew has recently had a myocardial infarction and attends diabetes clinic having had a repeat HbA_{1c} level in the diabetic range.

How would you manage Andrew's glycaemic medication from this position?

Janice, 57 years old and newly diagnosed with type 2 diabetes, has capillary glucose readings between 15 and 20 mmol/L and reports thirst and increased micturition.

How could you quickly improve Janice's symptoms and glucose control?

Tom is a 76-year-old man with longstanding type 2 diabetes who lives independently at home.

What target HbA_{1c} would you consider appropriate for Tom?

By working through this interactive case study, we will review the management of type 2 diabetes in the early years after diagnosis, when good control of glycaemia and cardiorenal risk factors has lasting benefits in preventing diabetes-related outcomes.

D *Diabetes & Primary Care's* series of interactive case studies is aimed at all healthcare professionals in primary and community care who would like to broaden their understanding of diabetes.

These four brief scenarios review the management of type 2 diabetes in the early years after diagnosis, when good control of glycaemia and cardiorenal risk factors has lasting benefits in preventing diabetes-related outcomes.

The format uses typical clinical scenarios as tools for learning. Information is provided in short sections, with most ending in a question to answer before moving on to the next section.

Working through the case studies will improve our knowledge and problem-solving skills in diabetes care by encouraging us to make evidence-based decisions in the context of individual cases.

Readers are invited to respond to the questions by typing in their answers. In this way, we are actively involved in the learning process, which is hopefully a much more effective way to learn.

By actively engaging with these case histories, readers will feel more confident and empowered to manage such presentations effectively in the future.

David Morris, Undergraduate Clinical Tutor, Keele University; and retired GP and Specialist Doctor in Diabetes

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case study

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