Managing Type 2 diabetes in adults

Adult with type 2 diabetes

**Lifestyle interventions**

**Dietary control**

**Metformin tolerated**

- Offer standard release initially
- Consider modified release if not tolerated

**If HbA1c rises to 48 mmol/mol**

- **Consider monotherapy**

**If HbA1c rises to 58 mmol/mol**

- **Consider dual therapy**

**If HbA1c rises to 58 mmol/mol**

- **Consider triple therapy**

**If any of:**

- Person needs help injecting
- Lifestyle restricted by hypoglycaemic episodes
- Blood glucose rises markedly before meals
- Person prefers injecting before meals
- Blood glucose rises markedly before meals
- Hypoglycaemia is a problem

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**Key**

- **MET** = Metformin
- **SU** = Sulfonylurea
- **DPP** = Dipeptidyl peptidase-4 Inhibitor
- **PIO** = Pioglitazone
- **SGLT** = Sodium-glucose cotransporter 2 Inhibitors

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**Insulin Programme**

- **Consider insulin programme**

- **Continue**
  - **MET**
- **Review need for other HbA1c lowering drugs**

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**Consider insulin programme**

- **Meet**
- **SU**

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**Consider:**

- **NPH insulin** (once/twice daily)
- **Insulin detemir** or **Glargine**
- **Short acting insulin analogues**

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- **Monitor people on insulin for the need to change the regimen**

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**An individualised target may be needed, depending on person's:**

- Preferences
- Comorbidities
- Risks from polypharmacy
- Risks from tight blood glucose control
- Ability to achieve long term benefits

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