EDITORIAL NOTE

Diabetes Management

Shakti Singh*

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Diabetes is a long-term metabolic condition characterized by high blood sugar levels (hyperglycaemia). It is a primary cause of illness and mortality around the world, and its incidence is increasing at an alarming rate. Diabetes affected an estimated 463 million persons in 2019, with the number expected to rise to 783 million by 2045. The increasing prevalence of diabetes is a major public health concern, and it is essential to implement effective strategies for prevention and management. Diabetes management is a complex task that requires a multidisciplinary approach involving healthcare professionals, patients, and their families.

There is a growing body of evidence that lifestyle interventions, such as diet, exercise, and weight loss, can effectively prevent or delay the onset of type 2 diabetes. For people with diabetes, lifestyle interventions can significantly improve glycaemic control and reduce the risk of complications. In addition to lifestyle interventions, there is a range of pharmacological treatments available for diabetes. These treatments can help to control blood sugar levels and reduce the risk of complications. However, it is important to note that medications are not a substitute for lifestyle changes.

Diabetes management is a lifetime journey, and it is critical that persons with diabetes

have access to high- quality, comprehensive treatment. This care should include frequent blood sugar monitoring, diabetes self-diabetes management, management education, and support from healthcare professionals and other individuals with diabetes. In addition to providing individual care, it is also important to address the broader societal factors that contribute to the diabetes epidemic. These factors include unhealthy diets, physical inactivity, and obesity. Addressing these factors will require a combination of public health policies, community-based interventions, and individual behaviour change.

The management of diabetes is a complex challenge, but it is one that we can overcome with concerted effort. By working together, we can prevent diabetes, provide effective care to people with diabetes, and improve the quality of life for millions of people around the world.

Key Points

- Diabetes is a chronic metabolic disorder characterized by elevated blood sugar levels.
- The prevalence of diabetes is rising at an alarming rate worldwide.
- Diabetes management requires a multidisciplinary approach involving healthcare professionals, patients, and their families.
- Lifestyle interventions, such as diet, exercise,

Head of Clinical Operations, Senocare Services Pvt Ltd, Gurgaon, India

*Corresponding author: Shakti Singh, Head of Clinical Operations, Senocare Services Pvt Ltd, Gurgaon, India, Tel: 919810438026; Email: drshakti.singh7@gmail.com

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and weight loss, can effectively prevent or delay the onset of type 2 diabetes

- Pharmacological treatments are available for diabetes, but medications are not a substitute for lifestyle changes.
- The management of diabetes is a lifelong journey, and it is important for people with diabetes to have access to high quality, comprehensive care.
- Addressing the broader societal factors that contribute to the diabetes epidemic is essential for preventing and managing diabetes.

Functional Medicine Approach to Diabetes Management

A functional medicine approach can help regulate glycaemic indices while also reducing many other health concerns.

Nutrient considerations

While medications might assist to normalise glucose levels, evidence indicates that diet-based methods may also be beneficial [1-6]. Dietary consumption of numerous nutrients, including zeaxanthin, lycopene and carotene was significantly lower in diabetic retinopathy

patients, indicating a possible link between carotenoids and the advancement of retinopathy [7].

As a precursor to vitamin A, -carotene, along with lutein and zeaxanthin, has been found to reduce oxidative stress in ocular tissue in all populations, and it may slow the onset of cell death and mitochondrial dysfunction in diabetic patients, as well as reduce inflammation [8].

A variety of dietary therapies, including low carbohydrate dietary interventions, intermittent fasting, and ketogenic and Mediterranean diets (plant based, high in vegetables, fruits, whole grains, beans, nuts and seeds, olive oil) may help patients achieve T2D remission [9-13].

Importance of exercise and lifestyle interventions

Exercise and diet therapies may outperform medications sometimes. The lifestyle intervention included an aerobic exercise programme as well as a food plan aimed at reaching a BMI of less than 25 [14].

In Functional Medicine, we encourage our patients to adopt healthy lifestyle practices, eating more high-quality food that are rich in phytonutrients ad increasing physical activity.

References

- 1. Xiao H, Tang J, Zhang F, et al. Global trends and performances in diabetic retinopathy studies: a bibliometric analysis. Front Public Health. 2023;11:1128008.
- 2. Rodríguez-Gutiérrez R, Montori VM. Glycemic control for patients with type 2 diabetes mellitus: our evolving faith in the face of evidence. Circ Cardiovasc Qual Outcomes. 2016;9:504-12.
- 3. Teo ZL, Tham YC, Yu M, et al. Global prevalence of diabetic retinopathy and projection of burden through 2045: systematic review and meta- analysis. Ophthalmology. 2021;128:1580-91.
- 4. Boulin M, Diaby V, Tannenbaum C. Preventing unnecessary costs of drug- induced hypoglycemia in older adults with type 2 diabetes in the United States and Canada. PLoS One. 2016;11:e0162951.
- 5. Abdelhafiz AH, McNicholas E, Sinclair AJ. Hypoglycemia, frailty and dementia in older people with diabetes: reciprocal relations and clinical implications. J Diabetes Complications. 2016;30:1548-54.
- 6. Liu H, Wang F, Liu X, et al. Effects of marine-derived and plant-derived omega-3 polyunsaturated fatty acids on erythrocyte fatty acid composition in type 2 diabetic

- patients. Lipids Health Dis. 2022;21:20.
- 7. Shalini T, Jose SS, Prasanthi PS, et al. Carotenoid status in type 2 diabetes patients with and without retinopathy. Food Funct. 2021;12:4402-10.
- 8. Johra FT, Bepari AK, Bristy AT, et al. A mechanistic review of β-carotene, lutein, and zeaxanthin in eye health and disease. Antioxidants (Basel). 2020;9:1046.
- 9. Brown A, McArdle P, Taplin J, et al. Dietary strategies for remission of type 2 diabetes: a narrative review. J Hum Nutr Diet. 2022;35:165-78.
- 10. Sharma SK, Mudgal SK, Kalra S, et al. Effect of intermittent fasting on glycaemic control in patients with type 2 diabetes mellitus: a systematic review and meta-analysis of randomized controlled trials. touchREV Endocrinol. 2023;19:25-32.
- 11. Massara P, Zurbau A, Glenn AJ, et al. Nordic dietary patterns and cardiometabolic outcomes:

- a systematic review and meta-analysis of prospective cohort studies and randomised controlled trials. Diabetologia. 2022;65:2011-31.
- 12. Jooste BR, Kolivas D, Brukner P, et al. Effectiveness of technology-enabled, low carbohydrate dietary interventions, in the prevention or treatment of type 2 diabetes mellitus in adults: a systematic literature review of randomised controlled and non-randomised trials. Nutrients. 2023;15:4362.
- 13. Jing T, Zhang S, Bai M, et al. Effect of dietary approaches on glycemic control in patients with type 2 diabetes: a systematic review with network meta-analysis of randomized trials. Nutrients. 2023;15:3156.
- 14. Johansen MY, MacDonald CS, Hansen KB, et al. Effect of an intensive lifestyle intervention on glycemic control in patients with type 2 diabetes: a randomized clinical trial. JAMA. 2017;318:637-46.