

Are you at risk?

You could be one of many Canadians who have type 2 diabetes and don't know it.

If you are age 40 or over, you are at risk for type 2 diabetes and should be tested at least every three years. **If you check any of the boxes to the right, you should be tested for diabetes earlier and/or more often.**

Today, more than ever before, people with diabetes can expect to live active, independent and vital lives if they make a lifelong commitment to careful management of the disease.

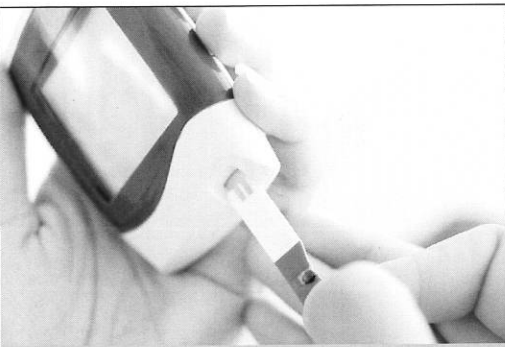
It is important to be tested for type 2 diabetes if you are at risk. Left untreated or improperly managed, diabetes can result in a variety of complications, including:

- Heart disease
- Kidney disease
- Eye disease
- Problems with erection (impotence)
- Nerve damage

My risk assessment

- I have a parent, brother or sister with diabetes.
- I am a member of a high-risk group (Aboriginal, Hispanic, South Asian, Asian or African descent).
- I have health complications that are associated with diabetes.
- I gave birth to a baby that weighed over 4 kg (9 lb) at birth.
- I had gestational diabetes (diabetes during pregnancy).
- I have been told I have prediabetes (impaired glucose tolerance or impaired fasting glucose)
- I have high blood pressure.
- I have high cholesterol or other fats in my blood.
- I am overweight (especially if I carry most of my weight around my middle).
- I have been diagnosed with any of the following conditions:
 - Polycystic ovary syndrome
 - Acanthosis nigricans (darkened patches of skin)
 - Psychiatric disorders: schizophrenia, depression, bipolar disorder
 - I have obstructive sleep apnea
 - I use glucocorticoid medication

DON'T IGNORE THESE RISK FACTORS. The earlier you are diagnosed, the sooner you can take action to stay well – now and in the future. If you already have type 2 diabetes, your children, brothers and sisters are at risk. Urge them to be tested for diabetes.



What are the symptoms?

Signs and symptoms of diabetes include the following:

- Unusual thirst
- Frequent urination
- Weight change (gain or loss)
- Extreme fatigue or lack of energy
- Blurred vision
- Frequent or recurring infections
- Cuts and bruises that are slow to heal
- Tingling or numbness in the hands or feet
- Trouble getting or maintaining an erection

It is important to recognize, however, that many people who have type 2 diabetes may display no symptoms.

Diagnosis of diabetes

Show your doctor this fact sheet and ask him or her to test you for diabetes using one of the following tests. The amount of glucose (sugar) in your blood is measured in mmol/L.

Fasting blood glucose

You must not eat or drink anything except water for at least eight hours before this test. A test result of 7.0 mmol/L or greater indicates diabetes.

OR

Random blood glucose

This test may be done at any time, regardless of when you last ate. A test result of 11.0 mmol/L or greater, plus symptoms of diabetes, indicates diabetes.

OR

A1C

This test may be done at any time, regardless of when you last ate. A test result of 6.5 % or greater (in adults) and in the absence of factors that affect the accuracy of the A1C indicates diabetes.

OR

Oral glucose tolerance test

You will be given a special sweetened drink prior to this blood test. A test result of 11.1 mmol/L or greater taken two hours after having the sweet drink indicates diabetes.

A second test must be done in all cases (except if you have acute signs and symptoms). Once diabetes has been diagnosed, ask your doctor to refer you for diabetes education. The Canadian Diabetes Association also has many resources to help you understand diabetes better and live a long and healthy life.

Date: _____ 1st test: _____

Date: _____ 2nd test: _____

Across the country, the Canadian Diabetes Association is leading the fight against diabetes by helping people with diabetes live healthy lives while we work to find a cure. Our community-based network of supporters help us provide education and services to people living with diabetes, advocate for our cause, break ground towards a cure and translate research into practical applications.

*This document reflects the 2013 Canadian Diabetes Association Clinical Practice Guidelines. ©2013 Copyright

 **Canadian
Diabetes**
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