



Diabetes Self-Management Education and Support Practice Module

December 2021

*Implementation of Quality Improvement Initiatives to Improve
Diabetes and Hypertension*



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Quality
Insights

Table of Contents

Purpose of Module	3
Evidence Confirms: DSMES Improves Health Outcomes	3
White Paper: The Connection Between COVID-19 and Diabetes.....	4
Diabetes & Prediabetes Screening: USPSTF Issues Final Recommendations	4
Diabetes and SDOH: ADA Publishes Scientific Review.....	5
Health Disparities: Racial and Ethnic Minorities are at Higher Risk for Developing Diabetes.....	5
Reducing Diabetes Burden: Recommendations from The Impact of Diabetes in Delaware Report.....	6
The Diabetes Epidemic.....	7
DSMES Programs.....	7
DSMES Referral Solutions	8
Quality Insights Can Help: Connect Your Patients to National DPP and DSMES	9
Enhance Your Care Team	9
Discussing Diabetes: Promoting Effective Communication	9
Partnering with Pharmacies to Prevent and Manage Diabetes.....	10
Patient Resources	10
Delaware Emergency Medical Diabetes Fund	10
Patient Self-Management: Diabetes Smartphone Apps.....	11
Patient Assistance: Insulin Cost Savings	11
Multilingual Diabetes Patient Education Materials	12
Library Learning: Diabetes Education Resources for Patients	13
Provider Resources	13
Diabetes & Prediabetes Academic Detailing from Quality Insights.....	13
Quality Insights EDISCO™ Online Continuing Education Courses.....	13
Centers for Disease Control and Prevention (CDC)	14
Know Diabetes by Heart™	14
American Medical Association STEPS Forward™	15
American Diabetes Association: Focus on Diabetes Pocket Guide.....	15

Purpose of Module

This module contains a high-level overview of evidence-based information related to diabetes and the utilization of Diabetes Self-Management Education and Support (DSMES) in Delaware. It was created to assist clinics and hospitals in promoting and improving quality improvement efforts, specifically related to improving referral to DSMES services across patient populations.

Please Note: Guidelines and recommendations referenced in this module are to be used along with physician/clinician judgment and treatment and should be based on each individual patient's unique needs and circumstances.



Evidence Confirms: DSMES Improves Health Outcomes

How can DSMES services help your patients manage diabetes?



A [new feature from the CDC](#)

highlights several success stories of patients who have participated in DSMES and achieved decreased blood glucose levels, a healthier lifestyle, and better understanding of how to live with diabetes.

DSMES is an evidence-based program accredited through the American Diabetes Association (ADA) and Association of Diabetes Care and Education Specialists (ADCES). DSMES provides an [evidence-based](#) foundation to empower people with diabetes to navigate self-management decisions and activities. Proven as a [cost-effective](#) tool by reducing hospital admissions and readmissions, as well as estimated lifetime health care costs related to lower risk for complications, this program helps improve health behaviors and health outcomes for people with diabetes.

DSMES has been [shown](#) to improve health outcomes. However, despite considerable evidence that DSMES services are cost-effective and have a positive impact on diabetes-related outcomes, utilization of DSMES services is suboptimal. In the United States, less than five percent of Medicare beneficiaries with diabetes and 6.8 percent of privately insured people with diagnosed diabetes have used DSMES services.

Discover more about the efficacy and benefits of DSMES by reviewing these resources from the ADA and American Heart Association's (AHA) [Know Diabetes by Heart™](#):

- [Podcast – Benefits of Diabetes Educator Referrals](#)
- [Webinar – Supporting Your Patients in Managing their CV Risk through Lifestyle Management](#)
- [Diabetes Self-management Education and Support in Adults with Type 2 Diabetes: A Consensus Report](#)

White Paper: The Connection Between COVID-19 and Diabetes

An August 2021 white paper, produced by the National Association of Chronic Disease Directors (NACDD) and the Kem C. Gardner Institute, summarizes the national and international literature regarding the connection between type 2 diabetes and COVID-19. It also visually illustrates the association between COVID-19 severity, the prevalence of adults living with diabetes, socioeconomic status, social vulnerability, and race and ethnicity through relevant state examples.



You can read [*The Connection between COVID-19 and Type 2 Diabetes: Underscoring the Need for Chronic Disease Prevention and Management*](#) by visiting the NACDD website.

Diabetes & Prediabetes Screening: USPSTF Issues Final Recommendations

The U.S. Preventive Services Task Force released a [final recommendation statement](#), published in the August 2021 [*Journal of the American Medical Association*](#), calling for prediabetes and type 2 diabetes screening for asymptomatic adults ages 35 to 70 who are overweight or obese. The recommendations, which were based on data from 89 publications, also included offering or referring patients with prediabetes to preventive interventions. The summary recommendation for clinicians is provided in the table below:

What does the USPSTF recommend?	Adults aged 35 to 70 years who have overweight or obesity: <ul style="list-style-type: none">• Screen for prediabetes and type 2 diabetes, and offer or refer patients with prediabetes to effective preventive interventions. Grade: B
To whom does this recommendation apply?	Nonpregnant adults aged 35 to 70 years who have overweight or obesity and no symptoms of diabetes.
What's new?	The USPSTF has lowered the starting age of screening from 40 to 35 years.
How to implement this recommendation?	1. Assess risk: <ul style="list-style-type: none">• Obtain height and weight measurements to determine whether patient has overweight or obesity. Overweight and obesity are defined as a BMI ≥ 25 and ≥ 30, respectively. 2. Screen: <ul style="list-style-type: none">• If the patient is aged 35 to 70 years and has overweight or obesity. Consider screening at an earlier age if the patient is from a population with a disproportionately high prevalence of diabetes (American Indian/Alaska Native, Black, Hawaiian/Pacific Islander, Hispanic/Latino), and at a lower BMI (≥ 23) if the patient is Asian American.• Screening tests for prediabetes and type 2 diabetes include measurement of fasting plasma glucose or HbA_{1c} level or an oral glucose tolerance test.
How often?	The optimal screening interval for adults with an initial normal glucose test result is uncertain. Screening every 3 years may be a reasonable approach for adults with normal blood glucose levels.
What are other relevant USPSTF recommendations?	The USPSTF has made a recommendation on behavioral weight loss interventions to prevent obesity-related morbidity and mortality in adults with a BMI ≥ 30 . This recommendation is available at https://www.uspreventiveservicestaskforce.org
Where to read the full recommendation statement?	Visit the USPSTF website (https://www.uspreventiveservicestaskforce.org) to read the full recommendation statement. This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.

The USPSTF recognizes that clinical decisions involve more considerations than evidence alone. Clinicians should understand the evidence but individualize decision-making to the specific patient or situation.

Diabetes and SDOH: ADA Publishes Scientific Review

The ADA convened a writing committee to help advance opportunities for diabetes population health improvement through addressing social determinants of health (SDOH). The SDOH and diabetes writing committee reviewed literature on:

1. Associations of SDOH with diabetes risk and outcomes
2. The impact of interventions targeting amelioration of SDOH on diabetes outcomes

[Read the scientific review](#) in ADA's *Diabetes Care* to learn more.

“ I have come to realize that meaningful change in the numbers and in the lives of people with diabetes hinges on improving upon the social determinants of health. ”

Paul Reed, MD, Deputy Assistant Secretary for Health, Director, Office of Disease Prevention and Health Promotion, November 2021, [Diabetes is Not Just an Outcome](#)

Health Disparities: Racial and Ethnic Minorities are at Higher Risk for Developing Diabetes



The [Centers for Medicare & Medicaid Services Office of Minority Health \(CMS OMH\)](#) confirms racial and ethnic minorities are at a higher risk of developing diabetes. Many who are diagnosed experience challenges managing their diabetes and are more likely to experience complications. Several factors, including lack of access to health care, quality of care received, and socioeconomic status, are all barriers to preventing diabetes and having effective diabetes management once diagnosed.

Below are a few resources that can help health care professionals, patients, and their families manage diabetes. To review the full suite of online tools, visit the [CMS OMH website](#).

- CMS has added a new “Insulin Savings” filter on Medicare Plan Finder to display plans that will offer the capped out-of-pocket costs for insulin. [Click here](#) to learn more.
- Read CMS OMH's [Diabetes Management: Directory of Provider Resources \(PDF\)](#) which identifies resources on the management of type 2 diabetes that could be useful for providers and care teams.
- Download [Managing Diabetes: Medicare Coverage and Resources](#), a new resource to help patients with managing their diabetes and health coverage. This resource is also available in [Spanish](#).

Reducing Diabetes Burden: Recommendations from The Impact of Diabetes in Delaware Report

Increasing in-person and online access to diabetes programs and establishing a diabetes registry are key recommendations in [*The Impact of Diabetes in Delaware, 2021*](#) report, delivered to the Delaware General Assembly on June 28, 2021.

The biennial report was produced by Delaware's Department of Health and Social Service's Division of Public Health (DPH) and Division of Medicaid & Medical Assistance (DMMA), and the Department of Human Resources' Statewide Benefits Office (SBO).

DPH, DMMA, and SBO make eight recommendations to reduce Delaware's diabetes burden and improve health outcomes among adults with, or who are at-risk for, the disease:

1. Promote healthy lifestyles through stakeholder collaboration.
2. Continue to educate state of Delaware employees and retirees, especially those at highest risk for diabetes and its related complications, about the signs and symptoms of diabetes and available prevention and management programs/resources, and to continue to highlight the National Diabetes Prevention Program (National DPP) and Medicare Prevention Program as covered benefits.
3. Promote clinical-community linkages to increase the percentage of Delawareans with diabetes who comply with diabetes recommendations.
4. Leverage electronic health record capabilities and other technologies to improve medication adherence among people with diabetes.
5. Develop a statewide Delaware Diabetes Registry to monitor diabetes management and reduce disparities in health outcomes among Delawareans with diabetes.
6. Increase in-person and online access to, and participation in, the nationally- recognized and evidence-based National DPP for adults at high risk for diabetes.
7. Increase in-person and online access to, and participation in, Diabetes Self-Management Education and Support (DSMES) for adults with diabetes.
8. Create and implement a comprehensive Diabetes Training Module for community health workers, nurse navigators, lay leaders, and health coaches to standardize prediabetes and diabetes support efforts in Delaware.

Find this publication and additional resources for health care professionals by visiting the [Diabetes and Heart Disease Prevention and Control Program page](#) on the DPH website to access additional diabetes and heart disease assistance and resources.



Diabetes Stats in DE

13%

% of all DE adults who reported being **diagnosed with diabetes** in 2019, including 14,672 Medicaid clients and 12,369 Group Health Insurance Plan (GHIP) members

13%

% of DE residents diagnosed with **prediabetes**

25,000

Estimated number of undiagnosed Delawareans living with diabetes

\$1.1 Billion

Estimated **annual cost** of diabetes per year in DE

Source: [The Impact of Diabetes in Delaware, 2021](#)

The Diabetes Epidemic

According to the Centers for Disease Control and Prevention (CDC) [National Diabetes Statistics Report 2020](#), **over 34 million Americans have diabetes** and face its devastating consequences. What's true nationwide is also true in Delaware.

FACT: Over 98,000 Delaware Adults Have Been Diagnosed with Diabetes

The statistics are staggering. The incidence of diabetes in the state of Delaware and across the country continues to rise. **So what can be done to combat it?**

The answer: EDUCATION and SELF-MANAGEMENT

People with diabetes need to be educated about their disease and instructed on what they can do to best manage it, and in some cases, reverse their condition through lifestyle modifications.

DSMES Programs

DSMES programs are a collaborative process between the diabetes educator and the patient that usually includes up to 10 hours of counseling in the first year after diagnosis to address a variety of topics in depth, from healthy eating and exercise to monitoring and medications to problem-solving.

[Get in touch](#) with our team today to see how Quality Insights can strengthen your practice to bridge the gap between patients living with diabetes and DSMES.

DSMES Referral Solutions

In accordance with the [*Standards of Medical Care in Diabetes—2022*](#), **all people with diabetes should participate in diabetes self-management education** and medical nutrition therapy to receive the support needed to facilitate the knowledge, decision-making, and skills mastery necessary for diabetes self-care.

The following DSMES referral guidance is based on recommendations from the [Association of Diabetes Care & Education Specialists \(ADCES\)](#).

Medical Nutrition Therapy (MNT)

For many individuals with diabetes, the most challenging part of the treatment plan is diet. Nutrition therapy plays an integral role in overall diabetes management. A [2019 ADA Diabetes Care](#) article cites that all individuals with diabetes should be referred for individualized MNT provided by a registered dietitian nutritionist (RD/RDN) who is knowledgeable and skilled in providing diabetes-specific MNT at diagnosis and as needed throughout the life span, similar to DSMES.



Find more information about MNT, including Medicare considerations, by visiting [the CDC DSMES Toolkit website](#). Patient-facing nutrition resources can be located on the [ADA website](#).

Locate a DSMES Program

Certified DSMES programs are those that have American Diabetes Association recognition or ADCES accreditation, which ensures the program meets the evidence-based National Standards for DSMES.

The following websites offer DSMES location assistance and contact information:

- [Association of Diabetes Care and Education Specialists](#)
- [American Diabetes Association](#)
- [Quality Insights](#): Locate Delaware-based DSMES and MNT programs in Kent, New Castle, and Sussex counties.
- [Livongo](#): This program is available to employees, pensioners, and their covered spouses and dependent children living with type 1 or type 2 diabetes who are enrolled in a State of Delaware Aetna or Highmark Delaware health plan.

Promote DSMES Education

Provide **free** resources to your patients to help them understand their diagnosis and reinforce the importance of diabetes education.

[Living with Type 2 Diabetes: Where Do I Begin?](#): This ADA booklet may be ordered free of charge in English and Spanish.

[Diabetes in Older People](#): This booklet from the National Institute on Aging (NIA) promotes diabetes education services as covered by Medicare (DSMT).

[Diabetes Resource Guide](#): Developed by the Delaware Diabetes Coalition, this guide focuses on helping patients live a healthier life by assuring they receive care according to evidence-based standards. Useful information includes Delaware-based National DPP locations, diabetes support groups, and more. Patients may download this guide at no cost in [English](#) and [Spanish](#).

Offer DSMES in Your Local Community

Want to learn more about the steps required to launch a DSMES in your community?

Download this Quality Insights flyer and access the [CDC DSMES Toolkit](#) for important details about accreditation, recognition, reimbursement, and more.

Make a Referral

Learn more about who, when, and how to make referrals to DSMES!



Download the [Quality Insights DSMES Referral Flyer](#) for step-by-step instructions and visit the [ADCES "Make a Referral" website](#).

Quality Insights Can Help: Connect Your Patients to National DPP and DSMES

At NO COST to your practice, your patients with prediabetes and diabetes can receive a National DPP or DSMES referral letter, portal message, or text encouraging them to enroll in an eligible program.

After initial contact is made, patients will receive a follow-up phone call to determine their level of interest in the program. Patient questions are addressed and communicated barriers are documented and shared with the referring practice. Prior to initiation of the campaign, participating practices receive an overview of the benefits of the National DPP or DSMES.



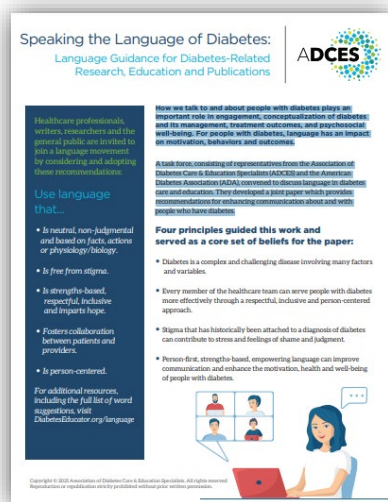
For more information, contact your local Practice Transformation Specialist or [Ashley Biscardi](#) at **302-290-9258**.

Enhance Your Care Team

Discussing Diabetes: Promoting Effective Communication

How we talk to and about people with diabetes plays an important role in engagement, conceptualization of diabetes and its management, treatment outcomes, and psychosocial well-being. For people with diabetes, language has an impact on motivation, behaviors, and outcomes. A task force, consisting of representatives from ADCES and the ADA, convened to discuss language in diabetes care

and education. The task force developed a [joint paper](#) which provides recommendations for enhancing communication about and with people who have diabetes.



A supplemental handout, titled [*Speaking the Language of Diabetes: Language Guidance for Diabetes-Related Research, Education, and Publications*](#), highlights preferred communication strategies to more effectively engage people with diabetes, including language that:

- Is neutral, non-judgmental and based on facts, actions or physiology/biology
- Is free from stigma
- Is strengths-based, respectful, inclusive, and imparts hope
- Fosters collaboration between patients and providers
- Is person-centered

For additional resources, including the full list of word suggestions, visit DiabetesEducator.org/language.

Partnering with Pharmacies to Prevent and Manage Diabetes

Did you know? Pharmacies in your local community may offer [Diabetes Self-Management Education and Support \(DSMES\)](#) and [National Diabetes Prevention Program \(National DPP\)](#) services. Encourage your patients to connect with their local pharmacist to discuss enrollment in these evidence-based, lifestyle change programs by sharing the following flyers developed by the U.S. Department of Health and Human Services:

- [Could You Have Prediabetes \(English\)](#)
- [Could You Have Prediabetes \(Spanish\)](#)
- [Do You Have Diabetes](#)

Patient Resources

Delaware Emergency Medical Diabetes Fund

The [Delaware Emergency Medical Diabetes Fund](#) provides diabetes services, medications, and supplies to residents of Delaware on an emergency need basis. It provides a maximum payment of \$500 per client, per 12 consecutive months, for items directly related to diabetes that will eliminate or alleviate the medical condition.

Eligibility Requirements*:

- Individual has diabetes (type 1, type 2, gestational, or other) or prediabetes.
- Medical need is present that could result in serious impairment of health, prolonged hospitalization, complications, or death.
- Individual is without resources immediately accessible to meet his/her health needs.

**Requests are evaluated on case-by-case basis, using established Delaware State Service Center financial screening and eligibility criteria.*

This program is administered by the Delaware Division of State Service Centers. Learn more about eligibility and referral by downloading the [DE Emergency Medical Diabetes Fund 2021/2022 Guidelines](#) and by calling the [Delaware Diabetes & Heart Disease Prevention and Control Program](#) at 302-744-1020.

Patient Self-Management: Diabetes Smartphone Apps

Smartphone apps can be a great tool to promote patient self-management on a day-to-day basis, which is especially important for patients living with diabetes.

In an effort to assist practices in identifying apps that may be of most benefit to their patients, Quality Insights has updated our **Free Apps to Help You Better Manage Your Diabetes** patient handout. This flyer provides a general listing of various nutrition, glucose tracking and healthy living resources designed to help your patients succeed. [Download the flyer here.](#)



Patient Assistance: Insulin Cost Savings

"I ran out of insulin a week ago. There was a glitch with the insurance company, and when I went to pick up my insulin, they said my co-pay was over \$1,000. So, I just ate low carbs for the week."

A version of this story happens all across America, every day. As a health care community, we can help patients access low or no cost insulin, so no one goes without this life-saving hormone. The following resources are provided to help you readily access medication assistance:

- [Insulin Cost Savings Toolkit](#): Developed by Dr. Diana Isaacs, PharmD, BCPS, BC-ADM, BCACP, CDCES in collaboration with the Association of Diabetes Care & Education Specialists, this document provides ready access to patient assistance programs, specific to manufacturer and product.

- [Insulinhelp.org](https://insulinhelp.org): An affiliate site of the ADA, this website provides valuable information that helps patients readily identify the type of information they should have available when applying for assistance, contact information for insulin manufacturers and assistance programs, and outlines manufacturer-specific COVID-19 coverage enhancements. Patients can call **1-800-DIABETES** during normal business hours to receive direct assistance and interpreter service is available.
- [Needy meds.org](https://needy meds.org): This website offers users the capability to search for medication assistance programs by diagnosis. It includes assistance options for diabetes medications, supplies and laboratory services.
- [GetInsulin.Org](https://getinsulin.org): Helps people living with diabetes find cost-savings programs from manufacturers, governmental agencies, non-profits and more. The site and plan details are available in English and Spanish, and serve people with diabetes in the United States.



Multilingual Diabetes Patient Education Materials

The ADA Patient Education Library offers free, downloadable diabetes education resources that can be filtered by category and language. [Eleven language options are available](#) to select from, including [Spanish](#) and [Haitian Creole](#). Some items to select from include:

- Prediabetes: What Is It and What Can I Do?
- Are You at Risk for Type 2 Diabetes?
- Factors Affecting Blood Glucose
- Diabetes: An Introduction
- Diabetes Symptoms (describes symptoms of Type 1 and Type 2 diabetes)

For additional multilingual education resources covering a variety of health topics, please visit [MedlinePlus®](#) and review [Providing Multilingual and Multicultural Health Information](#), a resource list from the National Library of Medicine.



Library Learning: Diabetes Education Resources for Patients

In collaboration with the Delaware Division of Libraries, [a diabetes health information section has been developed in all Delaware libraries](#). Easy-reading and viewing materials are available in English and Spanish, and information is available on topics including diabetes in general, cookbooks, and other resources which are available to check out using a library

card. The libraries also have computers patients can use to go to the internet and find even more information on diabetes. If a patient has never used the computer before, the library personnel will be happy to help them. They can take [The Diabetes Resource Guide](#), developed by Delaware Diabetes Coalition, with them so they remember which websites they would like to view.

Provider Resources

Diabetes & Prediabetes Academic Detailing from Quality Insights

Quality Insights is continuing our initiatives to improve the health of Delawareans by promoting evidence-based care for prediabetes and diabetes. As part of our ongoing efforts, your practice can take advantage of academic detailing for diabetes and prediabetes at NO COST to you by signing up to participate in this project. [Download this flyer](#) to learn more about the initiative.

Quality Insights EDISCO™ Online Continuing Education Courses

Quality Insights and the Delaware Division of Public Health have partnered to provide a series of interactive and engaging e-learning courses to the practices, health systems, and federally qualified health systems in Delaware. Currently, ten courses are being offered to our participating practices **at NO COST through June 30, 2022**. Some of these e-learns offer **continuing medical education (CME) and continuing nursing education (CNE) credits**.

Download the [course flyer](#) and [watch this brief video](#) below for more information. Courses designed to assist you in the diagnosis and treatment of diabetes include:

- [Diabetes: Awareness to Action](#): The purpose of this course is to increase awareness of available DSMES and National Diabetes Prevention Program (National DPP) services and increase referrals to these programs in Delaware.
- [Health Literacy](#): If your practice is striving to embrace diversity and reach all populations, this course is for you!

- [Medication Therapy Management](#): Improving medication adherence is an important way to increase quality and reduce cost. Learn how collaborating with pharmacists to provide medication therapy management can greatly impact patient adherence.
- [Motivational Interviewing](#): Learn how to expand the role of your team and encourage enhanced communication with patients.
- [Tobacco Cessation](#): Learn how to support your patients' efforts to quit tobacco and improve their chances for success.

Centers for Disease Control and Prevention (CDC)

Enhance your professional development with CDC [webinars and videos](#).

Learn approaches for engaging communities, increasing cultural competence, and promoting diabetes prevention and management.

Credit is available for some webinars.

- [Discovering the Full Super Powers of DSMES](#)
- [The DSMES Toolkit: Your One-Stop Shop for Successful Diabetes Self-Management Education and Support Services](#)
- [Getting Your Patients Ready for Effective Health Communications: A New Beginning in Diabetes Management](#)
- [Don't Blame Me!: Helping Providers and People with Diabetes Overcome Challenges for Behavior Change](#)
- [Food Insecurity and Its Impact on Diabetes Management: Identifying Interventions That Make a Difference](#)



Know Diabetes by Heart™

The AHA and the ADA have joined forces with the goal to reduce cardiovascular death, heart attack, stroke, and heart failure in people living with type 2 diabetes. To support you and your clinic or health system, you'll find the latest cardiovascular and diabetes science, patient educational and clinical care tools and quality improvement programs.

- [Managing Cardiovascular Risk in People Living with Diabetes: Shared Decision-making Discussion Guide and Approaches for Developing a Successful Treatment Plan](#)
- Webinar: [The Role of Diabetes Technology for People Living with Type 2 Diabetes and Impact on CVD Risk Management](#)
- Webinar: [Beyond Awareness: How Do We Reverse Compounded Disparities in Heart and Heart Disease?](#)



American Medical Association STEPS Forward™

The American Medical Association (AMA) STEPS Forward™ offers a collection of engaging, interactive, and CME-eligible educational toolkits that are practical, actionable “how-to” guides to transform and improve your practice. Enhance your care team’s delivery of diabetes care by completing these modules:

- [Managing Type 2 Diabetes: A Team-Based Approach](#)
- [Pre-Visit Planning: Save Time and Improve Care](#)
- [Racial and Health Equity: Concrete STEPS for Smaller Practices](#)



American Diabetes Association: Focus on Diabetes Pocket Guide

The ADA has summarized key clinical recommendations for health care professionals on eye health management for people with or who are at risk for diabetes. Annual comprehensive eye exams play a crucial role in the early detection, intervention, and prevention of eye disease and vision loss caused by diabetes. Early detection, timely treatment, and appropriate follow-up care can reduce a person’s risk for severe vision loss from diabetic eye disease by 95 percent.

[Download *Focus on Diabetes Pocket Guide: Guide to Clinical Eye Care for Patients with or at-risk for Diabetes.*](#)