Who is at risk?

Here are some of the risk factors for prediabetes and diabetes:

- Being overweight
- Being age 45 years or older
- Having a family history of diabetes
- Having a history of gestational diabetes
- Belonging to an ethnic group at high risk for diabetes, such as Native American, African American, Hispanic, or Asian

It is important to discuss your risk factors with your doctor. If you think you may be at risk for prediabetes, see your doctor to be tested.

What is the difference between prediabetes and diabetes?

The difference between prediabetes and diabetes is in how high the blood sugar levels are. Prediabetes is when your blood sugar (or glucose) levels are higher than normal but not high enough to be diagnosed as type 2 diabetes. Look at the table on page 2 to see the levels. Did you know that 84 million adults—more than 1 in 3—have prediabetes?¹

What’s going on in your body?

A condition called insulin resistance increases the risk of getting both prediabetes and type 2 diabetes. Insulin is a hormone that is made by the pancreas, a large gland behind the stomach. Insulin helps sugar from food move from your blood into your body’s cells. Your cells need sugar for energy. Sugar from food can be from sweet foods and drinks, like candy, cakes, cookies, pies, and soda, or from carbohydrates like fruit, bread, rice, pasta, and milk that turn into sugar.

When you have insulin resistance, your body produces insulin but does not use it effectively. So sugar builds up in the blood, which can lead to prediabetes or type 2 diabetes. Most people with insulin resistance aren’t aware that they have it for many years, until it turns into type 2 diabetes. But the good news is that if people find out early that they have insulin resistance, they may be able to delay progression to type 2 diabetes. See the box on page 2 to find out how.

Insulin works like a key, unlocking the doors on the cells in your body to let blood sugar in. Once the cell doors open, sugar is able to move from the blood into the cells, where it belongs. Once inside the cells, sugar provides energy to the body.
How is prediabetes diagnosed?

You may have prediabetes without having any symptoms. Prediabetes is found with one of the following tests:

- **Fasting plasma glucose (FPG) test**—Measures blood sugar when you haven’t eaten anything for at least 8 hours
- **Glucose tolerance test (GTT)**—Measures blood sugar after you haven’t eaten anything for at least 8 hours and 2 hours after you drink a sugary drink provided by a doctor or laboratory
- **A1C**—Measures your average estimated blood sugar over the past 3 months

Your doctor will look for these values to diagnose prediabetes and diabetes:

<table>
<thead>
<tr>
<th>Test</th>
<th>Prediabetes</th>
<th>Diabetes</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPG</td>
<td>100–125 mg/dL</td>
<td>126 mg/dL or higher</td>
</tr>
<tr>
<td>GTT</td>
<td>140–199 mg/dL</td>
<td>200 mg/dL or higher</td>
</tr>
<tr>
<td>A1C</td>
<td>5.7%–6.4%</td>
<td>6.5% or higher</td>
</tr>
</tbody>
</table>


How can you lower your risk of developing type 2 diabetes if you have prediabetes?

Losing weight is the best way to avoid developing type 2 diabetes if you are overweight. Talk with your diabetes care team about what your target weight should be.

There are no medicines approved by the FDA to treat prediabetes. If you have prediabetes, your blood sugar should be checked for type 2 diabetes yearly. According to the American Diabetes Association (ADA), if your blood sugar levels are normal, you should have them checked every 3 years, or more often if your doctor recommends it.

Prediabetes does not automatically turn into type 2 diabetes. You can take steps to lower your risk.

The American Diabetes Association says that you can lower your risk for type 2 diabetes by:

- Losing just 7% of your body weight (or 15 pounds if you weigh 200 pounds)
- Doing moderate physical activity (such as brisk walking) for 30 minutes a day, 5 days a week

For more information, visit Cornerstones4Care.com