

# Type 2 diabetes mellitus

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TYPE 2 DIABETES MELLITUS TYPE 2 DIABETES MELLITUS Diabetes has become a serious threat to various populations around the world. This has been due to the new cases of diabetic people and also deaths as a result of the condition. There are two types of diabetes. However, one type known as type 2 diabetes has become common in the society. It occurs when the body is unable to manufacture enough insulin to perform functions optimally, or it may occur when the cells in the body fail to respond to the insulin (NHS, 2013). It is more prevalent as compared to type I diabetes. In United States, type 2 diabetes is associated with over 90 percent of diabetes cases (Whiteman, 2014). The prevalence is expected to increase in the future. The paper will seek to describe the tools for management of disease along with various goals as well as the influence of cultural diversity on the tools. There are five essential tools for management of type 2 diabetes. The important first tool is lifestyle modification. The initial stages of the disease can be controlled through diet and exercise alone (Royal Australian College of General Practitioners (RACGP), 2014). In advanced stages, lifestyle and diet change plays a significant role in glycaemic control as well as reducing cardiovascular development. Exercise helps in improving metabolic control as also lead to improvement of glucose tolerance (RACGP, 2014). In terms of diets, one should focus on low-fat diets and more nutritious foods. Eating low-fat diet food has been shown to help in cardiovascular protection (RACGP, 2014). The other thing is a regular evaluation. The evaluation helps in identifying factors that may be affecting diabetic person health (RACGP, 2014). The diabetic people may have other challenges to deal with such as other medical conditions, work, and even stress.

The other tool is an HbA1c test. The affected person should regularly be tested so as to assess how well the condition is being controlled. The HbA1c goal for diabetic patients is one lower than 48 mmol/mol (NHS, 2013). The target helps in eliminating challenges such as eye disease, kidney diseases, and heart disease. The other tool of management of the disease is through medication. The medication is meant to sustain long-term glycaemic regulation and also to prevent complications associated with the disease (RACGP, 2014). Such therapy may entail control of blood pressure (BP) as well as the level of lipid. The goal of BP for the patient is 6-8 mmol/l at fasting and 8-10 mmol/l in normal time while the lipid goal is 2 mmol/litre (RACGP, 2014). This helps in preventing cardiovascular events and preventing early death. The last tool entails management of cardiovascular risks. The risks have been showing as the leading cause of death in people with the condition (RACGP, 2014). Therefore, engaging in ways of reducing these risks will help in reducing the rate of mortalities.

Cultural diversity will have an effect on these tools. The first thing is that some form of tools may be easily accessible to some population while in other they may not be accessible. In some other population, it may be a challenge in accessing nutritious and affordable food necessary for controlling the disease (RACGP, 2014). Also, some cultural barriers may be an impediment to effective care in the long-term.

#### References

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