The lab's role in diabetes management

Managing the world's fastest growing disease

Diabetes is a complex, multi-system disease that requires an effective strategy for the diagnosis, treatment and management of patients. Providing care that best fits the patient's needs requires the combined efforts of a cross-functional team — of which the lab is a critical part. With diabetes on the rise, monitoring and managing increased A1c testing is more important than ever.[1]

Core lab vs. point-of-care testing

Depending on the clinical situation, testing may be done in the lab or at the point of care (POC). A robust diabetes management strategy employs both.

Benefits of central laboratory testing

- Automate A1c testing for true walk-away capability and maximum efficiency
- Remove whole blood specimens from your main chemistry line with a dedicated, fully automated A1c analyzer
- Most reliable A1c test results

Benefits of point-of-care testing

- Face-to-face counseling with results during a visit helps improve patient satisfaction and outcomes
- Helps reduce disease complications, hospital admissions and re-admissions
- Different options for sample size and time to result

Did you know?

Researchers recently proposed reclassifying diabetes into five different clusters to better identify patients with higher risk of complications:

Cluster 1
Severe autoimmune diabetes (SAID)

Cluster 2
Severe insulin-deficient diabetes (SIDD)

Cluster 3
Severe insulin-resistant diabetes (SIRD)

Cluster 4
Mild obesity-related diabetes (MOD)

Cluster 5
Mild age-related diabetes (MARD)

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1 https://www.news-medical.net/news/20180302/Diabetes-mellitus-reclassified-into-5-subtypes.aspx