

Evidence-Based Lifestyle Change Programs to Prevent or Delay Type 2 Diabetes

The American Diabetes Association's (ADA's) Standards of Medical Care in Diabetes recommends that providers refer patients with prediabetes to a lifestyle change program that is modeled on NIH's Diabetes Prevention Program (DPP).

CDC-recognized lifestyle change programs use curricula modeled on the DPP providing high-risk patients with a focused, evidence-based intervention that provides professional help to make small but impactful, lasting changes.

Year-long sessions are facilitated by a trained lifestyle coach with a focus on nutritional and physical activity modifications that can reduce the risk for or delay type 2 diabetes.

Research shows DPP-based/CDC-recognized lifestyle change programs are effective at preventing or delaying type 2 diabetes.

Diabetes onset is expected to be delayed by 11.1 years with the lifestyle change program compared to 3.4 years with metformin.1



People who lost between 5% and 7% of their body weight had a 58% lower incidence of type 2 diabetes.²



A total of 5% of participants developed diabetes compared to 11% of group members who received a placebo instead.3



The program has lasting results, showing that participants had a 34% lower rate of type 2 diabetes 10 years after they had completed the program.⁴

Screen your patients for prediabetes using the ADA's Type 2 Diabetes Risk Test: diabetes.org/myrisk Test your patients for prediabetes using one of three blood tests: diabetes.org/a1c/diagnosis Refer them to an evidence-based lifestyle change program recognized by the CDC: nccd.cdc.gov/DDT_DPRP/Registry.aspx

¹ Aroda, V. R., & Ratner, R. (2008). Approach to the patient with prediabetes. The Journal of Clinical Endocrinology & Metabolism, 93(9), 3259–3265. ² Diabetes Prevention Program Research Group. (2002). Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. New England Journal of Medicine, 346, 393-403.

³ Ibid. ⁴ Ibid.

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