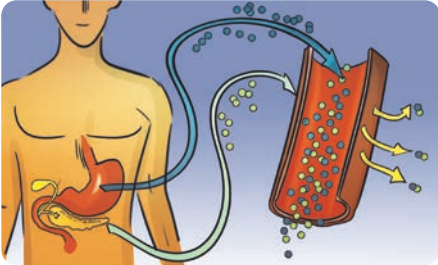


4 - Type 2 diabetes mellitus

Type 2 diabetes mellitus (T2DM) is the most common form. It has a slow onset in adults, especially those who are overweight or obese, and can remain latent even for long periods. It often occurs in people with a family history of type 2 diabetes.

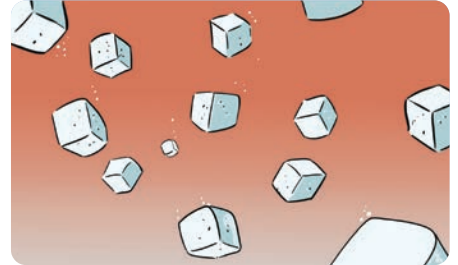
What is it?



T2DM is characterised by an increase in blood glucose, due to resistance to the insulin produced, or to reduced insulin production.



T2DM is a metabolic illness, the onset of which is favoured by overweightness/obesity, sedentary lifestyles, unhealthy dietary habits, lack of exercise and genetic predisposition.



In T2DM, the insulin produced is insufficient or is unable to enter the cells, preventing them from being able to properly absorb and use glucose, which therefore remains high in the blood.

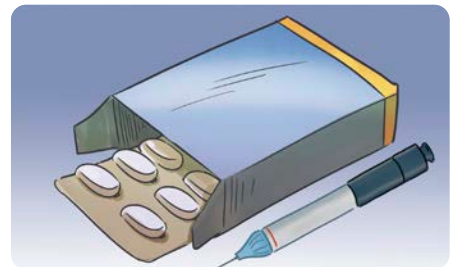
Treatment



The treatment of T2DM is based mainly on a balanced diet combined with consistent, regular exercise.



If lifestyle changes are inadequate, use of medication may be required.



The medicine of election for T2DM is metformin, which improves sensitivity to the insulin produced without causing hypos; however, pharmacological therapy must be tailored to meet individual clinical needs.

Therapy and other risk factors



In order to achieve the target blood glucose value it is essential to reach and maintain an appropriate body weight through a programme of healthy diet and regular exercise.



T2DM is often associated with high blood pressure and high cholesterol, cardiovascular risk factors that must be kept under control.



Smoking is another vascular risk factor that must be eliminated to reduce the damage it causes to the arteries of the whole body (kidneys, heart, brain, eyes and legs).