

Meglitanides- Repaglinide/ nateglinide

Stimulate insulin release via action on pancreatic beta cells – BUT different receptors to Sulphonvlureas

		Diabetes WHO criteria if symptomatic 1 test / if asymptomatic- 2 tests (UK 2 test?)		
HbA1c	Pre- diabetes			
(mmol/l)	42 - 47 6.0-6.4%	>48 >6.5 %		
Fasting plasma Glucose	Impaired Fasting glucose			
(mmol/l)	6.1 - 6.9	>7.0		
Random Glucose		>11.1		

HbA1C Conversion Chart

%	mmol/l	%	mmol/l	%	mmol/l	%	mmol/l	
6.0	42	7.0	53	8.0	64	9.0	75	
6.1	43	7.1	54	8.1	65	9.1	76	
6.2	44	7.2	55	8.2	66	9.2	77	
6.3	45	7.3	56	8.3	67	9.3	78	
6.4	46	7.4	57	8.4	68	9.4	79	
6.5	48	7.5	58	8.5	69	9.5	80	
6.6	49	7.6	60	8.6	70	9.6	81	
6.7	50	7.7	61	8.7	72	9.7	82	
6.8	51	7.8	62	8.8	73	9.8	83	
6.9	52	7.9	63	8.9	74	9.9	85	

HbA1c is not appropriate for diagnosis of diabetes in :

- ALL children and young people

-patients of any age suspected of having Type 1 diabetes

- patients with symptoms of diabetes for less than 2 months

- patients at high risk who are acutely ill (e.g. those requiring hospital admission)

-patients taking medication that may cause rapid glucose rise e.g. steroids, antipsychotics - patients with acute pancreatic damage, including pancreatic surgery

-in pregnancy

-presence of genetic, haematological and illness-related factors that influence HbA1c