



Your Personalized A1C Target

Each year, the American Diabetes Association (ADA) releases recommendations to help healthcare professionals treat and manage diabetes in their patients. Think of these recommendations as a roadmap for diabetes prevention and better care. Many topics are covered, including targets for blood glucose levels; changes you can make in your lifestyle, like a healthier diet or more exercise, to prevent diabetes or lower blood glucose levels; medications for treating diabetes; and ways to prevent *complications* of diabetes like amputations and kidney disease.

This handout focuses on the **ADA A1C target** for adults with diabetes. (Note: These targets are not for pregnant women with diabetes.)



Your A1C target

A1C is a measure of the average amount of glucose in your blood over the past 3 months. Your A1C level is shown as a percentage: for example, 6.9%.

The general A1C target for adults is **less than 7.0%**. The closer you get to this target, the better your chances for preventing health problems from diabetes. These problems can include foot sores, eye disease and blindness (*ret-in-o-pa-thy*), kidney disease (*ne-phro-pa-thy*), and nerve damage (*neur-o-pa-thy*).

Your A1C target could be higher or lower

The ADA says that A1C targets should be *personalized*, which means that your goal level will be chosen based on a few key pieces of information about your diabetes.

Your healthcare provider may set your **A1C target higher** than 7.0%, for example, if you have:

- A history of low blood glucose (*hy-po-gly-ce-mia*)
- Diabetes health problems that are difficult to manage
- Many other conditions that are related to diabetes, such as obesity or high cholesterol

Your A1C target may be **lower than 7.0%** if you:

- Are younger
- Have not had diabetes for a long time
- Do not have heart conditions (*car-di-o-vas-cu-lar*) related to diabetes

Your healthcare provider will work with you to set an A1C that's best for you.

REFERENCES: American Diabetes Association. Standards of medical care in diabetes—2015. *Diabetes Care*. 2015;38(suppl 1):S1-S93.

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