DIABETES MELLITUS TYPE 2

Diagnosis of Type 2

Address other risk factors

Lifestyle modification as part of initial management

Measure HbA1c every 3 months depending on control and changes in therapy

Target HbA1c should be ≤ 7.0%

Have lifestyle modifications been successful?

NO

Consider oral hypoglycaemic agents
Is there renal and/or cardiac dysfunction

YES

NO

Is Patient’s BMI > 25?

YES

Use metformin

NO

Consider either metformin or a sulphonylurea depending on plasma glucose

Adequate control?

NO

Continue to monitor blood glucose and HbA1c 3-6 monthly

YES

Continue to monitor HbA1c every 6 months

Disease identification card or disc recommended
Continue to monitor blood glucose and 
HbA1c 3-6 monthly

If patient on sulphonylurea and has normal 
renal function and has no cardiac dysfunction
add metformin
If poor renal function:
Consider adding a thiazolidinedione or insulin

Glossary:
• HbA1c – Glycosylated hemoglobin
• BMI – Body mass index

Applicable ICD 10 Coding:
• E11 Non-insulin-dependent diabetes mellitus
  o E11.0 Non-insulin-dependent diabetes mellitus with coma
  o E11.1 Non-insulin-dependent diabetes mellitus with ketoacidosis
  o E11.2 Non-insulin-dependent diabetes mellitus with renal complications
  o E11.3 Non-insulin-dependent diabetes mellitus with ophthalmic complications
  o E11.4 Non-insulin-dependent diabetes mellitus with neurological complications
  o E11.5 Non-insulin-dependent diabetes mellitus with peripheral circulatory complications
  o E11.6 Non-insulin-dependent diabetes mellitus with other specified complications
  o E11.7 Non-insulin-dependent diabetes mellitus with multiple complications
  o E11.8 Non-insulin-dependent diabetes mellitus with unspecified complications
  o E11.9 Non-insulin-dependent diabetes mellitus without complications
### Applicable ICD 10 Coding: (continued)

- **E12 Malnutrition-related diabetes mellitus**
  - E12.0 Malnutrition-related diabetes mellitus with coma
  - E12.1 Malnutrition-related diabetes mellitus with ketoacidosis
  - E12.2 Malnutrition-related diabetes mellitus with renal complications
  - E12.3 Malnutrition-related diabetes mellitus with ophthalmic complications
  - E12.4 Malnutrition-related diabetes mellitus with neurological complications
  - E12.5 Malnutrition-related diabetes mellitus with peripheral circulatory complications
  - E12.6 Malnutrition-related diabetes mellitus with other specified complications
  - E12.7 Malnutrition-related diabetes mellitus with multiple complications
  - E12.8 Malnutrition-related diabetes mellitus with unspecified complications
  - E12.9 Malnutrition-related diabetes mellitus without complications

- **O24 Diabetes mellitus in pregnancy**
  - O24.1 Pre-existing diabetes mellitus, non-insulin-dependent
  - O24.2 Pre-existing malnutrition-related diabetes mellitus
  - O24.3 Pre-existing diabetes mellitus, unspecified

### Note:

1. **Medical management reasonably necessary for the delivery of treatment described in this algorithm is included within this benefit, subject to the application of managed health care interventions by the relevant medical scheme.**

2. **To the extent that a medical scheme applies managed health care interventions in respect of this benefit, for example clinical protocols for diagnostic procedures or medical management, such interventions must –**
   a. **not be inconsistent with this algorithm;**
   b. **be developed on the basis of evidence-based medicine, taking into account considerations of cost-effectiveness and affordability; and**
   c. **comply with all other applicable regulations made in terms of the Medical Schemes Act, 131 of 1998**

3. **This algorithm may not necessarily always be clinically appropriate for the treatment of children. If this is the case, alternative paediatric clinical management is included within this benefit if it is supported by evidence-based medicine, taking into account considerations of cost-effectiveness and affordability.**