

Glycemic control and predicting diabetes complications in older adults

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Hemoglobin A1c (HbA1c) level plays an important role in type 2 diabetes (T2D) treatment, serving as an important indicator of an individual's glucose control. The Endocrine Society has outlined specific

HbA1c target ranges for older adults (above 65 years of age), based on their individual health status as being either in good, intermediate, or poor health.

A [retrospective cohort study](#) conducted by Yale School of Medicine, the University of Chicago, and Kaiser Permanente researchers examined the risk of complications for individuals based on their HbA1c levels. The paper is published in the *Journal of the American Geriatrics Society*.

The study compared outcomes of [older adults](#) whose HbA1c fell either in the recommended target range versus outside of that range while taking insulin or sulfonylureas, medications that increase the risk of low blood sugar reactions.

The study found that older adults in good health were at a higher risk of complications if their HbA1c was either below or above the target range, confirming current recommendations. In contrast, while those in [poor health](#) were at a much higher risk of complications than those in good health, their risk did not vary based on whether their HbA1c was on target or outside of the target range.

This study highlights the importance of appropriate glucose control for those in [good health](#), and suggests that stricter glycemic control may not help reduce the risk of complications for those in poor health.

More information: Kasia J. Lipska et al, Glycemic control and diabetes complications across health status categories in older adults treated with insulin or insulin secretagogues: The Diabetes & Aging Study, *Journal of the American Geriatrics Society* (2023). [DOI: 10.1111/jgs.18565](https://doi.org/10.1111/jgs.18565)

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