

FHAME

Applying family history to personalized medicine

Diabetes

Average risk screening for type 2 diabetes should begin at age 40 and be repeated every 3 years.

Individuals at increased risk for type 2 diabetes should have screening earlier and/or more frequently. Screening should include a fasting plasma glucose and/or glycated hemoglobin (A1C).

Risk assessment:

There are many risk factors for type 2 diabetes such as age, gender, past and current medical history, and family history.

With regards to family history an individual is considered at increased risk if there is:

- A first-degree relative with type 2 diabetes
.....
- Higher risk ethnicity (e.g. East Asian (Chinese, Vietnamese, Filipino, Korean, etc.), South Asian (East Indian, Pakistani, Sri Lankan, etc.), Black (Afro-Caribbean))
.....



Management

Consider screening earlier than age 40 and/or more frequently than every 3 years (i.e. every 6-12 months) in people at very high risk

References

The Canadian Diabetes Risk Questionnaire CANRISK
<https://health.canada.ca/apps/canrisk-standalone/pdf/canrisk-en.pdf>

2018 Diabetes Canada Guidelines <http://guidelines.diabetes.ca/cpg>