Management of hyperglycaemia in type 2 diabetes: a consensus algorithm for the initiation and adjustment of therapy

A consensus statement from the American Diabetes Association and the European Association for the Study of Diabetes

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In Fig. 1, a ‘>’ symbol was mistakenly used in place of a ‘<’ symbol. In Fig. 2, an arrow was incorrectly positioned.

The corrected figures are reproduced here with the amendments shown in red.

Fig. 1 Initiation and adjustment of insulin regimens. Insulin regimens should be designed taking lifestyle and meal schedule into account. The algorithm can only provide basic guidelines for initiation and adjustment of insulin. See [71] for more detailed instructions. ^aPremixed insulins are not recommended during adjustment of doses; however, they can be used conveniently, usually before breakfast and/or dinner if the proportion of rapid- and intermediate-acting insulins is similar to the fixed proportions available. *bg* Blood glucose

Fig. 2 Algorithm for the metabolic management of type 2 diabetes. Reinforce lifestyle intervention at every visit. **a** Check HbA_{1c} every 3 months until HbA_{1c} is <7%, and then at least every 6 months. **b** Although three oral agents can be used, initiation and intensification of insulin therapy is preferred based on effectiveness and expense. **c** See Fig. 1 for initiation and adjustment of insulin