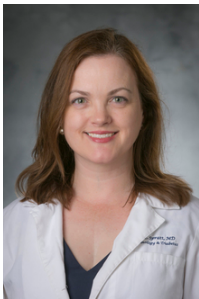




## North Carolina Diabetes Advisory Council



### From the Desk of Our Co-Chairs



**Susan Spratt, MD**

*DAC Co-Chair*

With Joanne's term as DAC Co-Chair concluding soon, we are preparing for a thoughtful leadership transition. We are seeking a dedicated individual to step into this important role and continue advancing the work of the NC DAC.

We are looking for someone who is passionate about the mission of the NC DAC and eager to support the following efforts:

- Educate and publicly validate early detection, treatment, and self management training for diabetes control as a health priority for all North Carolinians
- Provide scientific credibility and public validation for new service priority areas and interventions based on evolving clinical, epidemiological, and technological advances
- Foster interagency collaboration and networking to identify, utilize, and expand resources for diabetes control services
- Evaluate, present, and propose strategies for diabetes control in North Carolina based on assessed need, estimated costs, potential benefits, and likelihood of success

#### Time Commitment and Responsibilities

- Participate in subcommittee meetings and or NC DAC planning meetings two to three times per month
- Co lead three full DAC meetings per year
- Welcome new members and provide leadership and support to subcommittee chairs

**Joanne Rinker MS, RDN, BC-ADM, CDCES, LDN, FADCES**  
*DAC Co-Chair*

Have you seen the new 2026 ADA Standards of Medical Care in Diabetes? Below are my (Joanne Rinker's) top 10 key highlights of the 2026 ADA Standards of Care.

You can find the standards at [www.diabetes.org](http://www.diabetes.org)



**1. CGM Recommended at Onset of Diabetes and Broadly Expanded**

**Access**

The ADA now recommends continuous glucose monitoring (CGM) at diagnosis for anyone using insulin and for anyone who could benefit from real-time glucose data, regardless of treatment pathway.

**2. Removal of Prerequisites for Insulin Pump or AID Initiation**

The 2026 Standards remove prior treatment requirements before starting continuous subcutaneous insulin infusion (CSII) or automated insulin delivery (AID) systems, improving access and reducing administrative barriers.

**3. AID Systems Endorsed as Preferred Insulin Delivery for Most People with T1D**

AID systems are now the preferred insulin delivery method for all people with type 1 diabetes and for insulin-using type 2 diabetes when appropriate. Additionally, Figure 9.2 suggests that at every visit, there should be shared decision making on if the mode of insulin delivery is right for the person with diabetes and AID, MDI and inhaled insulin should be considered.

**4. Expanded Use of Glucose-Lowering Therapies for Cardiorenal & Liver Benefits**

New guidance emphasizes choosing glucose-lowering medications based on kidney, heart, and liver benefits—including use for people on dialysis.

**5. Updated Obesity Treatment Recommendations, Including Personalized Dosing**

The Standards introduce individualized dose strategies for obesity pharmacotherapy in people with diabetes and, for the first time, guidance on obesity treatment in people with type 1 diabetes.

**6. Expanded Nutrition Guidance Including Evidence-Supported Eating Patterns**

2026 updates highlight eating patterns that prevent type 2 diabetes (e.g., Mediterranean-style and low-carbohydrate patterns) and stress monitoring for adequate nutrition during obesity treatment.

**7. New Guidance for Diabetes Management in Complex Clinical Settings**

For the first time, the Standards address:

- Hyperglycemia management during cancer therapy
- Glucose management for transplant recipients

**8. Revised Blood Pressure Targets**

BP goals have been updated with:

- Tighter goals for individuals at high cardiovascular or kidney risk
- More relaxed goals for most older adults

**9. Major Updates in Screening, Safety, and Risk Monitoring**

New recommendations include:

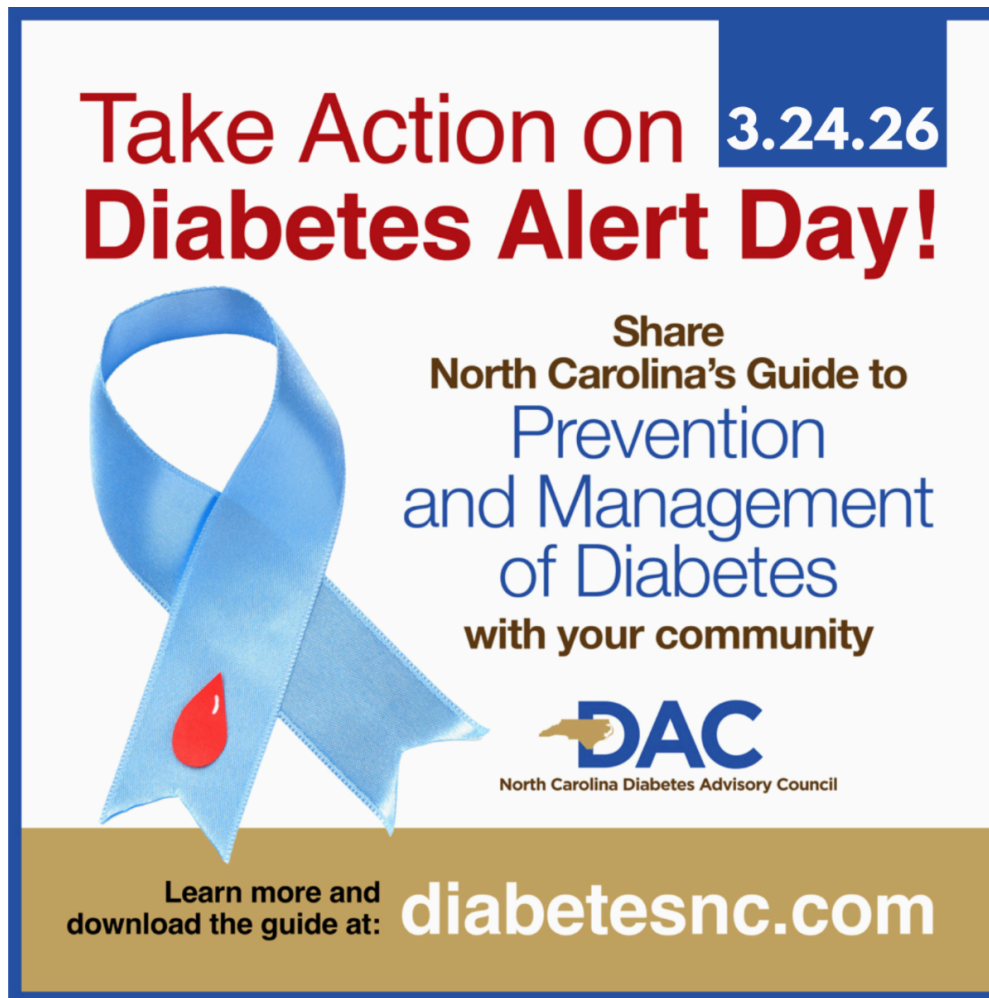
- Autoantibody-specific monitoring (e.g., IA-2 autoantibody risk management)
- Monitoring glucose for patients on glucocorticoids, PI3K $\alpha$  inhibitors, immune checkpoint inhibitors, and mTOR inhibitors

## 10. Stronger Emphasis on Person-Centered Care, Education, and Behavioral Health

The 2026 Standards emphasize:



- Shared decision-making based on preferences, prognosis, comorbidities, and financial considerations
- Continuous quality improvement in health systems
- Expanded guidance on behavioral health screening and workplace accommodations related to diabetes technology use

## Diabetes Alert Day Campaign



**Take Action on 3.24.26**  
**Diabetes Alert Day!**

Share  
 North Carolina's Guide to  
 Prevention  
 and Management  
 of Diabetes  
 with your community

Learn more and  
 download the guide at: **diabetesnc.com**

Diabetes Alert Day is on March 24th, and we are launching a campaign to spread awareness about the North Carolina's Guide to Prevention and Management of Diabetes, 3rd Edition. Below is a message you can forward directly to your contacts. Let us know if you have any questions.

*"I'm reaching out as a member/collaborator with the **NC Diabetes Advisory Council (NC DAC)** to share an important resource—the newly released 3rd edition of the **NC Guide to Prevention and Management of Diabetes!***

*Diabetes affects so many of us—our patients, family members, friends, and colleagues. This guide is a powerful tool to help prevent and manage diabetes, and the **NC DAC** needs your help to get it into the hands of those who can benefit most. **Download the NC Diabetes Guide here:** <https://www.diabetesnc.com/guide/>*

*I encourage you to:*

- Use the guide as a resource in your practice, workplace, or community initiatives.
- Share it with healthcare professionals, health system leaders, community organizations, and anyone impacted by diabetes or working in this field.

Thank you for taking the time to read this email. By downloading and sharing this guide, you are helping to reduce the burden of diabetes in North Carolina and improve the health of our communities."

## Reader's Corner

The work of the [North Carolina Diabetes Advisory Council](#) depends on active member participation. To move priorities forward this year, stronger engagement is needed in the workgroups.

As outlined in our bylaws, members are expected to:

- Attend at least two (2) of the three (3) annual meetings, in person or virtually, and vote on matters brought forward.
- All current members will be expected to participate in **one or more** of the following:
  - A subcommittee/workgroup
  - Arrange or present at an NC DAC meeting

Workgroups are where the strategic goals turn into action. If you are not currently serving on a workgroup, now is the time to step in and contribute.

DAC workgroups include:

- Advocacy and Policy Workgroup
- Emerging Science and Evidence Workgroup
- Membership Engagement Workgroup
- Type 1 Diabetes Trends and Needs Workgroup

Please review the descriptions and sign up using the link below: [Workgroup Sign-Up Link](#).

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[The North Carolina's Guide to Prevention and Management of Diabetes, 3rd Edition](#) is live!

This guide includes basic information about diabetes, its effects on the North Carolina population, and suggestions on how individuals can prevent and manage the disease.

You can download your copy [English or Spanish](#).

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[The Audiology Project \(TAP\)](#) is a 501c3 nonprofit organization, working to raise awareness of the link between chronic diseases and hearing and balance disorders.

[ADA Call for Comments - TAP Advocacy in Action](#)  
[TAP Hearing Screen](#)  
[TAP Education Materials For Patients](#)  
[TAP Education Materials For Professionals](#)

[These articles have been submitted and may feature some of our DAC collaborators and members.](#)

**Accessibility of Diabetes Education in the United States: Barriers, Policy Implications, and the Road Ahead.** *Health Affairs Scholar*. 2024 Aug.

<https://academic.oup.com/healthaffairsscholar/article/218/qxae09717737824>. Tharakan A, McPeck Hinz E, Zhu E, Denmeade B, German J, Huang WA, Brucker A, Rinker J, Memering C, Spratt S.

**Case Report: Use of Automated Insulin Delivery Systems in the Immediate Postpartum Period.** *AACE Endocrinology and Diabetes*. 12/22/25.

<https://doi.org/10.1016/j.aed.2025.12.009.12.009>  
Co-written by Dr. Donald Caraccio, Jamie Diner FNP, and Dr. Klara Klein.

**Increasing SGLT-2 Inhibitor Prescribing Through an Integrated Case-Finding Algorithm-Guided Interdisciplinary Intervention.** *Journal of the American Pharmacists Association*. 2025 Mar.

[https://www.japha.org/article/S1544-3191\(24\)00351-0/abstract](https://www.japha.org/article/S1544-3191(24)00351-0/abstract). Roberson CL, Hoffman AF, Cohen P, Jackson VL, Spratt SE.

**One Size Does Not Fit All: Understanding Microdosing Semaglutide for Diabetes in Multidose Pens.** *Diabetes Care*. 1/14/2025.

<https://doi.org/10.2337/dc24-2575>  
Co-written by Dr. Mary Chandran, Dr. Shelby Tungate Lopez, Dr. John Buse, and Dr. Klara Klein.

**Produce Prescription Subsidy for Patients With Diabetes: A Pragmatic Randomized Clinical Trial.** *JAMA Intern Med*. Published online February 16, 2026.

<https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2844658>. Drake C, Buckman C, Brucker A, et al.

**Tipping the Scales: Strategies to Improve Anti-Obesity Medication Access and Affordability.** *Journal of the American College of Clinical Pharmacy*.

<https://doi.org/10.1002/jac5.70118>  
Co-written by Dr. Amanda Boykin, Dr. Andrea Coviello, and Alayah Jennings-Johnson.

# Upcoming Events

The events listed below are not hosted or sponsored by the NC DAC. They were shared by DAC members for inclusion in the newsletter. If you'd like to submit an event for the next newsletter (pending approval by the co-chairs), please contact Dominique Ashley at [dominique.ashley@dhhs.nc.gov](mailto:dominique.ashley@dhhs.nc.gov).

- **Diabetes Care and Education Conference 2026:** March 6th | 8 AM - 5 PM
- **Breakthrough T1D Raleigh Summit:** March 7th | 9 AM - 12:30 PM
- **Breakthrough T1D Charlotte Summit:** March 14th | 9 AM - 12:30 PM
- **Talk on Geriatric Issues regarding Diabetes Management:** March 16 | 12 PM
- **Winning with Diabetes:** March 28th | 9 AM - 3 PM
- **A-Z Diabetes Boot Camp 2026:** April 6-10th
- **Breakthrough T1D Triad Summit:** April 25th | 9:30 AM - 1 PM
- Summer DAC Meeting: May 29th | 9:30 AM - 12:30 PM

## Help us reach 100 connections on LinkedIn!

Reaching 100 connections on [LinkedIn](#) helps us expand our network, share valuable resources, and highlight the work of our DAC collaborators and members. The more connections we have, the stronger our community becomes, fostering collaboration and visibility for everyone involved.

Connect with us on  
**LinkedIn**®

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