

Updates to ADA Standards of Care 2026

Section 5: Facilitating Positive Health Behaviors and Well-being to Improve Health Outcomes

- **Recommendation 5.40** was revised to recommend **routine assessment and avoidance of tobacco and e-cigarette/vaping use**. It also suggests providing or referring individuals for combination treatment, which includes tobacco and e-cigarette/vaping cessation counseling and pharmacologic therapy.
- **Recommendation 5.45** was updated to recommend **referral to a qualified behavioral health professional** if diabetes distress is not adequately addressed during the medical appointment.
- **Recommendation 5.46** was updated to recommend **screening for anxiety symptoms at least annually** in people with diabetes and encourage health care professionals to address anxiety symptoms within their scope of practice.
- **Recommendation 5.56** was amended to recommend **screening for sleep health** in people with diabetes and in those at risk for diabetes.

Section 6: Glycemic Goals, Hypoglycemia, and Hyperglycemic Crises

- **CRecommendation 6.17** was added to **promote inclusion of oral glucose in first aid kits** for use in treating hypoglycemia in workplaces, schools, and other institutions and public settings.

Section 8: Obesity and Weight Management for the Prevention and Treatment of Diabetes

- **Table 8.2** was **updated with obesity pharmacotherapy costs** as of 15 July 2025.

Section 9: Pharmacologic Approaches to Glycemic Treatment

- **Recommendation 9.24** was revised to **include healthy behaviors, DSMES, avoidance of therapeutic inertia, and social determinants of health** as essential components of the glycemic treatment plan in all people with diabetes.
- **Recommendation 9.33** was added for individuals on immunotherapy who develop hyperglycemia to recommend the **assessment of these individuals for the need of insulin therapy** to prevent potential diabetic ketoacidosis and to use additional testing to determine if hyperglycemia is related to immunotherapy-associated diabetes.
- **Recommendations 9.34 and 9.35a** state that **metformin should be considered as first-line treatment** for individuals with hyperglycemia due to mTOR inhibitors or PI3K inhibitors.
- **Recommendation 9.35b** states that **insulin should be reserved for severe hyperglycemia and hyperglycemic crises** due to its potential impact on PI3K inhibitor efficacy.
- **Recommendation 9.36** was added for individuals undergoing glucocorticoid treatment to recommend adjustment or initiation of **additional glucose-lowering therapies** to maintain individualized glycemic goals based on the glucocorticoid treatment plan and ongoing assessment of glucose levels.



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