

From Awareness to Action: New ADA Guidelines Expanding Diabetes Screening: A Call to Action for Family Physicians

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Early Detection through Antibody Screening for Type 1 Diabetes

As family physicians, we play a critical role in encouraging discussions with our patients. Many individuals are unaware that predictive screening is available, yet early detection could lead to proactive strategies and improved long-term outcomes.

With evolving diabetes care guidelines, family physicians and their clinical teams are now encouraged to broaden screening efforts for **type 1 diabetes (T1D)** and reassess patients with **type 2 diabetes (T2D)** who remain unstable despite standard treatments. Recent recommendations emphasize the critical role of **autoantibody screening and risk assessment** as a key strategy to improve early diagnosis and intervention.

New Screening Recommendations for Type 1 Diabetes

The **2024 American Diabetes Association (ADA)** guidelines stress the importance of screening for T1D-associated autoantibodies, particularly in **first-degree relatives of individuals with T1D** and patients with unclear diabetes subtype. Early identification of at-risk individuals enables closer monitoring and may facilitate enrollment in clinical trials designed to delay or prevent disease progression (ADA, 2024).

As a family physician, you are uniquely positioned to encourage conversations with your T1D patients about the value of screening family members who may be at risk. Many patients are unaware that predictive screening tests exist, yet early detection opens doors to preventive strategies and improved long-term outcomes.

The traditional approach relying on classic symptoms—such as polydipsia, weight loss, and polyuria—often delays diagnosis. Now, **blood tests detecting T1D-specific autoantibodies** provide a more reliable diagnostic tool that can identify the disease before a metabolic crisis occurs. Preserving endogenous beta cell function is essential for better clinical outcomes.

Considerations for Early Detection Antibody Screening

Who to screen?

- **First-degree relatives** of patients with T1D (siblings, children, parents).
- **Patients diagnosed with T2D but exhibiting poor response** to standard therapies, suggesting possible Latent Autoimmune Diabetes in Adults (LADA) or misclassified T1D.

- Individuals with **other autoimmune diseases** (e.g., thyroid disease, celiac disease) may have increased risk.

Key autoantibodies to test for include:

- Glutamic Acid Decarboxylase Autoantibodies (GADA)
- Islet Cell Cytoplasmic Autoantibodies (ICA)
- Insulin Autoantibodies (IAA)
- Insulinoma-Associated-2 Autoantibodies (IA-2A)
- Zinc Transporter 8 Autoantibodies (ZnT8A)

Many labs offer panels combining these antibodies for convenience and cost-effectiveness. Verify with your lab's billing department. The average national out-of-pocket cost for T1D Aab screenings is \$14.00. Cost for Aab screening varies by health plan, benefit design, and test. We encourage you to have your practice check with the health plan to confirm costs for patients.

There are also ongoing clinical trials and research that offer free screening to certain patients. More information can be found here: <https://www.trialnet.org/>

Pathway to Prevention screening is the first step for all TrialNet prevention studies. Screening is offered at no cost to eligible individuals to evaluate their personal risk of developing the disease. This unique screening can identify the early stages of type 1 diabetes (T1D) years before any symptoms appear. It also helps researchers learn more about how T1D develops and plan new studies exploring ways to prevent it.

- Relatives of people with T1D are 15 times more likely to develop the disease than the general population.
- Increased risk of developing T1D is linked to the presence of five diabetes-related autoantibodies, regardless if you have a relative or not.
- Breakthrough T1D, ADA and Endocrine Society now classify having two or more of these autoantibodies as early stage T1D.

Screening and Managing Type 2 Diabetes Patients for Autoimmune Markers

For T2D patients **not achieving glycemic stability despite optimized treatment**, consider screening for autoimmune markers to identify Latent Autoimmune Diabetes in Adults (LADA) or previously unrecognized T1D. Proper classification enables more effective treatment adjustments, including timely initiation of insulin therapy when needed.

Taking Action in Your Practice

- **Discuss T1D screening** with your T1D patients and encourage them to inform at-risk family members about available antibody testing.
- **Evaluate unstable T2D patients** for T1D autoantibodies to refine diagnosis and personalize treatment.
- **Stay current** with ADA guidelines and emerging research to optimize patient care.

Resources for Patients Living with Type 1 Diabetes in California

To support your patients living with T1D in Southern California, here are key local and statewide resources:

Breakthrough T1D (formerly JDRF) is driving to eliminate T1D and improve the lives of people living with it through funding research, advocacy and community engagement. <https://www.breakthrough1d.org/>

- **Breakthrough T1D Southern California Territory** – Provides peer support, local activities and education for those living with T1D. The territory includes the San Diego Chapter, which encompasses San Diego County, Temecula & Hawaii; The Los Angeles Chapter, including the Greater Los Angeles Area, Santa Barbara & Bakersfield; and the Orange County Chapter, including Orange County & the Inland Empire! Visit [Southern California Breakthrough T1D Diabetes Chapter Support](#)
- **Breakthrough T1D San Diego Chapter** – Provides peer support, local activities and education for those living with T1D. The Chapter serves San Diego, Temecula, Hawaii, and Imperial Valley. For events and support: [Breakthrough T1D Southern CA Event Calendar: Local support groups and meet ups](#)
- **Resources in Spanish:** [Diabetes tipo 1 - Breakthrough T1D](#); [Breakthrough T1D Español | Facebook](#); [Community Summits - Espanol](#); [Reunión Virtual Para Adultos y Familias con Diabetes Tipo 1 en Español](#)

American Diabetes Association

Offers education, advocacy, and support groups for diabetes patients and families. <https://diabetes.org/>

- **Mental Health Professionals that Specialize in Care of Diabetic Patients** Utilize the ADA's Health Provider Directory to find mental health specialists in California. <https://diabetes.org/tools-resources/mental-health-directory>

Conclusion

Family physicians play a critical role in expanding diabetes screening, improving early detection, and optimizing treatment pathways for both type 1 and type 2 diabetes

patients. Integrating antibody screening into practice not only enhances patient outcomes but also aligns with the latest ADA guidelines to proactively address the growing diabetes burden.

For further reading and detailed guidelines, see:

- ADA 2024 Standards of Care: [Diabetes Care Supplement](#)
- Prevention or Delay of Diabetes and Associated Complications: [Diabetes Care](#)

Thank you for your review of this key clinical information. CAFP received support from the Maryland AFP to host our POP 2025 Awareness to Action breakfast dedicated to learning more about T1D screening.

We hope you can complete a brief survey to improve work in this area. Please scan the QR code (or follow this link: <https://www.surveymonkey.com/r/ActionType1DB>) to complete a brief survey: [Awareness to Action for Type 1DB Screening State Engagement Survey](#)

