# **Beyond Medication: The Essential Role of Diabetes Educators**

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#### **Beyond Medication: The Essential Role of Diabetes Educators**

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Receiving a diabetes diagnosis can be overwhelming. It's hard to face the idea of managing a chronic illness for the rest of your life, especially when management involves a lot more than just taking your medications on time.

Fortunately, patients don't have to figure everything out on their own, or try to cram all their questions into one primary care visit. Today, a consultation with a diabetes educator is part of best practices, and a standard of care for patients with diabetes.

## Who Is a Diabetes Educator?

"A diabetes educator is a healthcare professional who has experience working with patients with diabetes, and specialized training to provide education and guidance to help them successfully manage their condition," said Meghann Moore, a Registered Dietitian Nutritionist and Certified Diabetes Care & Education Specialist at WWMG. Moore sees patients who have type 1 or type 2 diabetes, prediabetes or gestational diabetes.

"Technically, anybody can say 'Hi, I'm a nutritionist now.' You could read a book on nutrition, get super interested in whatever the latest trend or fad is and put up a website. That's not against the law," said Moore. But a Registered Dietitian Nutritionist (RDN) must have a bachelor's degree, 1000 hours of clinical training, pass a national exam, and earn continuing education credits every five years.

As an RDN, Moore also maintains WWMG's diabetes self-management education and support program accreditation through the Association of Diabetes Care and Education Specialists (ADCES), which assures her patients consistently receive a high quality of care.

"When I provide diabetes education, I am adhering to the national standards set forth by the ADCES and the American Diabetes Association and are updated every single year," said Moore. This is the gold standard of care for patients with diabetes.

Being accredited also requires tracking of patients' changes in A1c levels, as well as progress toward their (self-identified) goals for disease management.

"Since I started the program in 2016, the average change in A1c for patients who see me has been about a full 1.0% point" lower, which is significant, said Moore. She is quick to note that correlation is not causation – patients who see an educator are usually motivated to make lifestyle changes and adhere to medication schedules, "But it is exciting to see that association."

Besides lowering their A1c, patients who seek the support of a diabetes educator have been shown to have:

- Improved quality of life
- Reduced health care costs, and
- Increased use of primary care services, resulting in decreased use of acute care & hospital services, and a
- Lower risk of death (from any cause)

### What Does a Diabetes Educator Do?

A diabetes educator gives patients the skills they need to manage diabetes successfully.

"I talk about the lifestyle aspects of diabetes management – what they can do, with nutrition and physical activity being the foundation for that ," said Moore. Although healthy eating and being active are foundational, a diabetes educator offers support for all aspects of diabetes self-management, to include healthy coping, taking medications as prescribed, monitoring glucose levels, reducing risks, and problem-solving when issues come up.

"I provide education on the actual disease state, the pathophysiology. And when needed, I will also do training on medication," said Moore. "I think it's really important that if patients are asked to take a medication, that they know what it's doing in the body."

Moore can teach patients how to give themselves insulin injections, how to use any of the five FDA-approved insulin pumps, and within certain parameters, can even adjust dosing. She also helps patients utilize continuous glucose monitors (CGM) and the data they produce.

"If somebody is wearing a CGM, the first thing that I'm going to do is upload their data and have it right there on a screen in front of us during the visit," said Moore. Making sense of the data together, Moore and the patient discuss any concerns, such as side effects or frequent blood sugar spikes, and together develop a self-management plan for the patient to address them.

At a primary care checkup, providers are not always able to allocate extra time for indepth diabetes education and support tailored to each patient's individual circumstances. So a referral to a certified diabetes educator can be both helpful and valuable.

### **Managing Nutrition with Diabetes**

Although many patients may be hesitant to visit a diabetes educator because they expect to be put on a restrictive diet, Moore said diabetes management is both more complicated and less restrictive than most people realize. "There really does not exist a list anywhere of food that you can no longer eat because you have diabetes. That's not a thing. There are many different ways to eat to best manage your diabetes for better outcomes."

Moore teaches patients about options like counting carbs and portion control instead of simply cutting out types of food. While some patients find success with approaches like keto, other individuals can be healthy with a high-carb vegan diet, or something else that fits their lifestyle.

"I like to lay out the options for patients and have them decide the way that would work best for them and their family. And then let's get into the detail and I can actually calculate their calories or their carbs or whatever it might be that we're focusing on," said Moore.

"After I give somebody all this education about the disease and the nutrition part, I try to frame it as, 'What do you feel is reasonable that you can do from a self-management standpoint?' I've had patients tell me that they only came [to see me under pressure from their primary care] provider, but once they leave, they're like, 'Oh my gosh, this was so much better than I thought it was going to be!"

#### **Accessing Diabetes Education**

"It is a standard of medical care to refer all patients, when they're diagnosed with diabetes, to see a diabetes educator," said Moore.

But patients with diabetes can get a referral at *any* time from their WWMG primary care provider (or a provider outside of WWMG) to meet with a diabetes educator.

Nearly all insurance plans will cover diabetes education, and medical nutrition therapy is often covered for patients diagnosed with prediabetes, celiac disease, or high cholesterol (call your insurance provider to verify your specific coverage).

Moore says, "I really would like patients to see [diabetes education] as a partnership. I'm here to work with them, not here to tell them what to do. I'm here to give them information and help them figure out a way to make diabetes work in their lives. Everybody's different, and my recommendations are going to be tailored toward that individual. We really want to help people live a high-quality life with this chronic disease."

Meghann Moore offers Nutrition & Diabetes Education services in person at WWMG's Endocrinology clinic in Mukilteo. To schedule an appointment, call (425) 412-4311 or fill out our appointment request form online.

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