

Type 2 Diabetes

Blood sugar that stays too high because the body stops responding properly to insulin. It can often be significantly improved or put into remission with lifestyle changes.

What it is

Type 2 diabetes is the most common form of diabetes (around 9 in 10 cases). The body's cells gradually respond less to insulin, the pancreas can no longer keep up with making greater amounts of insulin, and then blood glucose rises. It is the end point of a slow process, which is why it can often be improved or reversed.

Symptoms to look out for

- Typically there has been a gain in belly fat over many years in the lead up
- Passing more urine, especially at night
- Increased thirst and tiredness
- Unexplained weight loss or blurred vision - this requires urgent medical attention
- Slow-healing cuts; frequent infections such as thrush

Many people have no symptoms for years.

Diagnosis is by blood test (HbA1c of 48 mmol/mol or above, usually repeated to confirm).

Who is at risk

Excess weight around the middle, inactivity, a diet high in sugar and ultra-processed food, increasing age, family history, South Asian, African or African-Caribbean background, past gestational diabetes or PMOS (previously called PCOS), poor sleep and long-term stress.

Improvement and remission is possible

Losing excess fat from the liver and pancreas can help, leading to significant improvement or even remission. In the UK DiRECT trial, about a third of people were still in remission after two years, and most of those had lost 15 kg or more. Not everyone needs to lose weight: cutting sugar and carbohydrate and building muscle help whatever your starting weight.

What you can do

- **Food.** Reduce sugar and refined carbohydrate. Build meals around protein, non-starchy vegetables and natural fats; reducing carbohydrate such as bread, rice, pasta and potatoes helps, so have these in smaller amounts.
- **Movement.** A 10 to 15 minute walk after meals blunts blood sugar rises. Work the big muscles 2 to 3 times a week as muscle is the body's biggest glucose store.
- **Sleep and stress.** Aim for 7 to 9 hours with regular times; build in a daily stress-reducing habit. Both directly affect insulin resistance.
- **Smoking.** Stopping matters as diabetes already raises heart and blood vessel risk.

Medicines

Metformin is usually first, now typically alongside an SGLT2 inhibitor, which also protects the heart and kidneys. GLP-1 medicines (such as semaglutide) lower blood sugar and weight and are used earlier and more often. Insulin and sulfonylureas remain options. In lifestyle improvements are made diabetes often improves, so glucose-lowering medicines may need to be reduced. If you are on medication always plan lifestyle changes with your clinician.

When to get help

- See a GP if you have excessive thirst, frequent urination, unexplained weight loss, fatigue or blurred vision.
- Get urgent help for very high blood sugar with vomiting, drowsiness, rapid breathing or confusion.
- If you have diabetes, attend regular reviews and eye, foot and kidney checks, and discuss any diet or weight-loss plan before starting.

This is general information, not medical advice. Always speak to a qualified healthcare professional about your own symptoms and treatment, including before changing any medication.

Summarised from the in-depth leaflet by Dr Campbell Murdoch, GP, UK · healthshelf.org · Reviewed August 2026