# Module 1

# Initiating insulin

**CPD QUESTIONNAIRE**

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**1. Average $HbA_{1c}$ in T2DM patients attending Cape Town state clinics was:**

☐ **A** 8.7% ☐ **B** 10.4%

**2. Of these T2DM patients treated with insulin, what percentage reached target $HbA_{1c}$ of 7%?**

☐ **A** 5% ☐ **B** 10.4% ☐ **C** 38%

**3. From South African mortality data (2016), natural causes of death were:**

☐ **A** TB > DM > cerebrovascular > other heart disease > HIV > hypertensive disease
☐ **B** TB > hypertensive disease > HIV > cerebrovascular > DM > other heart disease

**4. Which of the following patients should be a priority for diabetes testing in everyday clinical practice?**

☐ **A** ≥45 years old
☐ **B** Taking glucocorticoids, thiazide diuretics
☐ **C** Taking atypical antipsychotics
☐ **D** Taking PIs or NRTIs
☐ **E** All the above
☐ **F** A, B and D

**5. Patients with all forms of diabetes are likely to require insulin therapy at some stage of their disease.**

☐ **A** True ☐ **B** False

**6. Regardless of diabetes classification, the most important action is:**

☐ **A** Do not delay treating the hyperglycaemia
☐ **B** Refer all recently diagnosed diabetes to a specialised endocrinologist
☐ **C** To involve family and friends

**7. At initial diagnosis of T2DM, the clinician and patient should discuss:**

☐ **A** Alleviating/modifying symptoms with lifestyle changes
☐ **B** The introduction of medication including insulin
☐ **C** A and B

**8. To maintain glycaemic control over time requires therapy intensification. The primary reason for this is:**

☐ **A** Immune-mediated Islet cell antibodies ☐ **B** Progressive loss of β-cell function

**9. β-cell dysfunction, and insulin resistance in muscle and liver tissue, are the only core physiological changes that characterise T2DM.**

☐ **A** True ☐ **B** False

**10. Which of these oral diabetes agents reduce the pace of β-cell loss?**

☐ **A** DPP-4 inhibitors
☐ **B** GLP-1 receptor agonists
☐ **C** SGLT-2 inhibitors
☐ **D** All the above
☐ **E** A and B

**11. Which of these oral diabetes agents increase renal excretion of glucose?**

☐ **A** DPP-4 inhibitors
☐ **B** GLP-1 receptor agonists
☐ **C** SGLT-2 inhibitors
☐ **D** All the above
☐ **E** B and C

**12. Thiazolidinediones:**

☐ **A** Delay intestinal carbohydrate absorption
☐ **B** Decrease hepatic glucose production
☐ **C** Increase glucose uptake in skeletal muscle
☐ **D** B and C

**13. Which agent(s) increase insulin secretion from pancreatic β-cells?**

☐ **A** Biguanides
☐ **B** Sulphonylureas
☐ **C** Glinides
☐ **D** B and C

**14. Recommended $HbA_{1c}$ target, to prevent microvascular and macrovascular complications in most patients, is:**

☐ **A** <6.5% ☐ **B** <7% ☐ **C** <8%

**15. In the uncontrolled diabetes patient, significantly increased risk of MI, HF and stroke is associated with how long a delay in treatment intensification?**

☐ **A** 1 year ☐ **B** 2 years ☐ **C** 3 years

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