**Group Medical Visits**

- All adults, 18 years and older, Spanish-speaking Latinos living with type-2 diabetes, CMC patients
- Patients were recruited via flyers, Diabetes registry and referrals from their PCP.
- Inclusion criteria: sma: had a1c >9% (75mmol/mol) and/or lacked access to diabetes education and support outside of primary care visits, and attended a minimum of three sma sessions.
- Exclusion- disability or non-Spanish speakers

Intervention group had a total of 29 participants. The control group was a non-random, matched group of patients receiving upc at the fhc clinic. at baseline, intervention and control group participants were matched by age (within 5 years) and a1c levels (within 0.5-1%).

Additionally, each cohort was matched with their control in time so that baseline and follow-up data mirrored each other time chronologically (a1c collected at during same quarter)

**Baseline Data CMC**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>SMA Mean (SD)</th>
<th>Usual Care Mean (SD)</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>55 (12)</td>
<td>55 (12)</td>
<td></td>
</tr>
<tr>
<td>Baseline A1C</td>
<td>9.87 (1.67)</td>
<td>9.81 (1.9)</td>
<td></td>
</tr>
</tbody>
</table>
The intervention was implemented at a single site with a relatively homogeneous population of low-income, Spanish-speaking Latinos. However, the model could be implemented successfully in a different setting and with different characteristics. The intervention was not designed to test the effect of the intervention on health outcomes but rather to explore the potential for improving health outcomes in a real-world setting.

The treatment and control groups may have influenced each other in some way. For example, implementation of the intervention may have led to increased awareness and engagement with health services.

Limitations: Selection bias (e.g., randomized control group), threat to internal validity (design contamination), limited generalizability.

- 50% reduction in AIC at 6 months, which has significant implications for long-term health outcomes.
- 21% decrease in deaths related to diabetes.
- 37% decrease in macrovascular complications and a 14% decrease in microvascular diseases.
- 1.5% decrease in HbA1c levels, translated to a 3% decrease in AC values.

For patients in the control group, the 6-month AIC at 3 and 6 months, respectively, the 6-month change is statistically significant. Compared to the control group, the 3-month AIC at 3 months reveals a significant difference. The linear regression analysis revealed that there was a net reduction in AIC difference of 0.67.

Mean AIC at baseline, 3 and 6 months:

- Baseline: 9.75
- 3 months: 9.29
- 6 months: 8.62

Linear Regression at 6 months (Beta = -1.06, R squared = 0.67, p < 0.05)

Linear Regression at 3 months (Beta = -0.37, R squared = 0.21)
GROUP MEDICAL VISITS

Bring this card to each session for completion of the program and a chance to win prizes,

- Goals
- Self-monitoring
- Medications
- Active Lifestyle
- Healthy Meals

CITAS MEDICAS EN GRUPO

¡Traiga esta tarjeta a cada sesión para completar el programa y ganar premios!

- Metas
- Autocontrol
- Medicamentos
- Vida Activa
- Comidas Sanas
Learn more at heart.org/hbp

First step to preventing the "domino effect" of high blood pressure is the simple blood pressure check.

Sexual Dysfunction

Kidney Disease

Heart Attack

Heart Failure

Vision Loss

Stroke

High blood pressure is often the first domino in a chain.

Or "domino effect" leading to devastating consequences. Like:

Control Change Check
<table>
<thead>
<tr>
<th>Questions</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>How long will I need to take my medication?</td>
<td>TAKE THIS SHEET TO YOUR NEXT APPOINTMENT AND USE THE SPACE PROVIDED TO WRITE DOWN YOUR DOCTOR'S COMMENTS.</td>
</tr>
<tr>
<td>Can I drink alcohol?</td>
<td>This list of common questions about blood pressure will help you discuss test results, risk factors, and lifestyle changes (including medication) with your doctor.</td>
</tr>
<tr>
<td>Should I avoid any foods or other medications?</td>
<td></td>
</tr>
<tr>
<td>What if I forget to take my medication?</td>
<td></td>
</tr>
<tr>
<td>What are the side effects?</td>
<td></td>
</tr>
<tr>
<td>What kind of medication is best for me?</td>
<td></td>
</tr>
<tr>
<td>Will I need to take blood pressure medication?</td>
<td></td>
</tr>
<tr>
<td>What type of home monitor should I purchase?</td>
<td></td>
</tr>
<tr>
<td>Should I use a home blood pressure monitor?</td>
<td></td>
</tr>
<tr>
<td>How often should my blood pressure be checked?</td>
<td></td>
</tr>
<tr>
<td>How do I control my blood pressure?</td>
<td></td>
</tr>
<tr>
<td>Are there any lifestyle changes that will help me</td>
<td></td>
</tr>
<tr>
<td>How can high blood pressure affect my health?</td>
<td></td>
</tr>
<tr>
<td>What should my blood pressure numbers be?</td>
<td></td>
</tr>
<tr>
<td>What do my blood pressure numbers mean?</td>
<td></td>
</tr>
</tbody>
</table>
# Fats: The Good, The Bad, & The Ugly

## Good

**Monounsaturated & Polyunsaturated Fats**
- Can lower bad cholesterol levels
- Can lower risk of heart disease & stroke
- Can provide essential fats that your body needs but can't produce itself

**Source**
Plant-based liquid oils, nuts, seeds, and fatty fish

**Examples**
- **Oils** (such as canola, olive, peanut, safflower and sesame)
- **Avocados**
- **Fatty Fish** (such as tuna, herring, lake trout, mackerel, salmon and sardines)
- **Nuts & Seeds** (such as flaxseed, sunflower seeds and walnuts)

## Bad

**Saturated Fats**
- Can raise bad cholesterol levels
- Can lower good cholesterol levels
- Can increase risk of heart disease & stroke

**Source**
Most saturated fats come from animal sources, including meat and dairy, and from tropical oils

**Examples**
- **Beef, Pork & Chicken Fat**
- **Butter**
- **Cheese** (such as whole milk cheeses)
- **Tropical Oils** (such as coconut, palm kernel and palm oils)

## Ugly

**Hydrogenated Oils & Trans Fats**
- Can raise bad cholesterol levels
- Can lower good cholesterol levels
- Can increase risk of heart disease & stroke
- Can increase risk of type 2 diabetes

**Source**
Processed foods made with partially hydrogenated oils

**Examples**
- **Partially Hydrogenated Oils**
- **Some Baked Goods**
- **Fried Foods**
- **Stick of Margarine**

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**Eat a healthy dietary pattern that:**

- **Includes** good fats
- **Limits** saturated fats
- **Keeps** trans fats as **LOW** as possible

For more information, go to [heart.org/fats](http://heart.org/fats)
Prevent eye problems.

If you have a problem:

- Loss of vision
- An increase in eye pressure
- Cloudy vision
- Blurry vision

Your eyes, such as:

High blood sugar levels from diabetes can cause a number of problems with your eyes.

What can you do?

Good control
- Keep your blood sugar under control
- Keep your blood pressure under control
- Get a "diabetic" eye exam at least once a year

Keep your eyes healthy if you:

- Prevent problems and regular eye exams and taking good care of your diabetes are the best way to maintain your vision.
- Call your doctor or health clinic right away if you have any sudden change in your vision.

* Diabetic eye tests or exams are given only by an ophthalmologist (eye doctor) who has been trained to do them.
Name/Nombre

Progress towards your goal

Your feelings...

Your thoughts...