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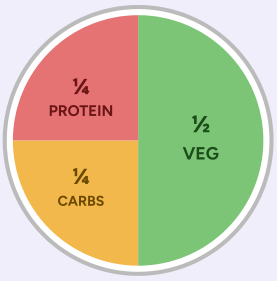
TYPE 2 DIABETES · NO KIDNEY DISEASE

Type 2 diabetes: protect your kidneys

For people with type 2 diabetes, normal kidney function and no protein in the urine. The aim is to control blood sugar and prevent complications, including kidney problems.

🎯 Your targets

What	Target	Why / how
🩸 HbA1c	Individual	For many people < 7%; your doctor sets the right target for you.
🩺 Blood pressure	< 130/80	Measure at home; a lower target may be set if well tolerated.
🧈 LDL cholesterol	By your risk	Usually < 70 or < 55 mg/dL, depending on cardiovascular risk.
⚖️ Weight	Lose ≥ 5%	If you are overweight: losing 5–10% brings clear benefits.
🫘 Kidneys	Monitor	eGFR (blood) and albuminuria (urine) at least once a year.



🍽️ The plate method

- **½:** vegetables and salad
- **¼:** fish, lean meat, egg or pulses
- **¼:** potatoes, rice, pasta or bread (wholegrain)
- Whole fruit for dessert; water

🍬 Hypoglycaemia (sugar < 70 mg/dL)

More likely with insulin or sulfonylureas (gliclazide, glimepiride).
Signs: shaking, sweating, hunger, palpitations, confusion.

- Take **15 g of sugar**: 3 sugar sachets in water, or half a glass of juice/regular fizzy drink
- Check again after **15 min**; repeat if still < 70
- Then have a small meal or snack

🚦 Food traffic lights

Choose

- Vegetables: half the plate; vegetable soup
- Pulses: beans, chickpeas, lentils*
- Fish (incl. sardines, mackerel), skinless poultry, eggs
- Wholegrain bread, oats, rice or pasta (controlled portion)
- Whole fruit: 1 piece at a time (orange, apple, pear)*
- Olive oil; unsalted nuts (small handful)*
- Water, unsweetened tea and coffee

In moderation

- Potatoes, rice, pasta, bread: ¼ of the plate
- Very sweet fruit (grapes, figs, persimmon): small portions
- Unsweetened milk and plain yoghurt; mild cheese
- Red meat: no more than 350–500 g a week
- Wine: a little and only with meals (risk of hypoglycaemia)
- Sweeteners: in moderation, as a step towards less sweetness

Avoid / rarely

- Fizzy drinks, juices (even 100% fruit), nectars, iced tea
- Cakes, custard tarts (pastel de nata), Algarve sweets (Dom Rodrigo, morgado)
- Sugar, honey, jam, sugary breakfast cereals
- Dried figs and candied fruit in large amounts
- Cured meats (enchidos), processed meats, fried food and fast food
- Liqueurs, spirits, medronho

** If you later develop kidney disease with high potassium, these foods may need adjusting.*

📞 Contact your doctor if...

- Frequent or severe hypos
- Repeated glucose > 300 mg/dL, great thirst
- Nausea, tummy pain, fast breathing*
- Vomiting or diarrhoea that stop you drinking
- A wound, blister or red area on a foot
- Swollen legs

** Especially if you take a "-gliflozin": this may be ketoacidosis — go to A&E.*

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🔄 Easy swaps

INSTEAD OF…	CHOOSE…
✗ Orange juice at breakfast	✓ A whole orange
✗ White bread with jam	✓ Mixed-grain bread with fresh cheese or egg
✗ Rice, potatoes and pasta on one plate	✓ Just one starchy food (¼ plate) and more vegetables
✗ Custard tart or cake as a snack	✓ Plain yoghurt + fruit or unsalted nuts
✗ Fizzy drink or iced tea	✓ Water, sparkling water, unsweetened iced tea

💊 Medicines and products: take care!

🩸 **Metformin**: take with meals. The dose is adjusted if kidney function falls.

💉 **Semaglutide, dulaglutide, tirzepatide…**: may cause nausea — eat slowly and little at a time, drink water. Tell staff you take them before anaesthesia or endoscopy.

🚫 **Anti-inflammatories (NSAIDs)** — ibuprofen, diclofenac…: affect kidneys and blood pressure. Only on medical advice.

💊 **Steroids** (tablets or injections) raise blood sugar: check your glucose more often.

💧 **"-gliflozins"** (dapagliflozin, empagliflozin…): protect kidneys and heart. Drink water, keep the genital area clean; pause on sick days and 2–3 days before planned surgery.

⚠️ **Insulin and sulfonylureas**: risk of hypoglycaemia; alcohol increases it. Always carry sugar with you.

🌿 **"Diabetes" supplements** (cinnamon, teas, vitamins): no proven benefit and they do not replace your medicines.

🤒 **Sick days** (vomiting, diarrhoea, fever): drink fluids, check your glucose more often and contact your doctor — you may need to pause metformin, "-gliflozins" for a few days.

🏃 Lifestyle

🚶 Exercise
≥ 150 min a week, on at least 3 days (no more than 2 days in a row without exercise) + strength 2–3 times a week.

🪑 Less sitting
Get up and move for a few minutes every 30 minutes.

⚖️ Weight
If you are overweight, losing ≥ 5% already improves sugar, blood pressure and cholesterol.

🚭 Smoking
Quitting protects your heart, kidneys, eyes and feet.

🍷 Alcohol
Little or none; always with food. It can cause hypoglycaemia hours later.

👣 Feet
Check them every day; comfortable shoes; foot check at least once a year.

👁️ Eyes
Retinopathy screening as advised (usually every 1–2 years).

💉 Vaccines
Flu, pneumococcal, COVID-19 and hepatitis B as advised.

🧪 Kidneys
eGFR and albuminuria at least once a year.

🍽️ A Mediterranean day with carbohydrates spread out — example

Breakfast	Mid-morning	Lunch	Snack	Dinner
1 slice of wholegrain bread with fresh cheese and tomato; coffee without sugar	1 piece of fruit (apple or pear)	Vegetable soup; grilled sea bream with 2 small potatoes, ½ plate of vegetables and olive oil	Unsweetened plain yoghurt with oat flakes	Black-eyed bean salad (feijão-frade) with boiled egg, onion, parsley and olive oil; whole fruit

References (sources of these recommendations):

1. American Diabetes Association. Standards of Care in Diabetes—2026 (sections 5, 6, 10, 11). Diabetes Care. 2026;49(Suppl 1).
2. Davies MJ et al. Management of hyperglycaemia in type 2 diabetes, 2022. Consensus report ADA/EASD. Diabetologia. 2022;65:1925–1966.
3. KDIGO 2022 Clinical Practice Guideline for Diabetes Management in CKD. Kidney Int. 2022;102(5S):S1–S127.
4. KDIGO 2024 Clinical Practice Guideline for the Evaluation and Management of CKD. Kidney Int. 2024;105(4S):S117–S314.
5. KDIGO 2021 Clinical Practice Guideline for the Management of Blood Pressure in CKD. Kidney Int. 2021;99(3S):S1–S87.
6. 2023 ESC Guidelines for the management of cardiovascular disease in patients with diabetes. Eur Heart J. 2023;44:4043–4140.
7. Direção-Geral da Saúde (Portuguese Directorate-General of Health) – PNPAS: Food Wheel and salt reduction recommendations (≤ 5 g/day, WHO).

This leaflet is for information only and does not replace individual advice from your doctor or dietitian. Targets should be personalised. Do not change or stop any medicine without talking to your doctor.