

The American Diabetes Association's (ADA) Standards of Care (SOC) in Diabetes is a comprehensive framework for clinicians, researchers, and policymakers. These guidelines outline essential management components of diabetes care, establish treatment goals, and provide tools to assess care quality all aimed at enhancing diabetes care and outcomes across diverse populations.

Key CGM Insights from the 2025 ADA SOC

 Type 1

- Initiation of continuous glucose monitoring (CGM) should be offered to people with type 1 diabetes **early in the disease, even at time of diagnosis. A**
- Recommend **early initiation, including at diagnosis, of CGM, Continuous subcutaneous insulin infusion (CSII), and Automated Insulin Delivery (AID). C**

 Type 2

- Consider using **rtCGM** and intermittent scan (isCGM) in adults with **type 2 diabetes treated with glucose lowering medications other than insulin** to achieve and maintain individualized glycemic goals. **B**
- Recommend **rtCGM A** or isCGM for diabetes management to youth **C** and adults **B** with diabetes on any type of insulin therapy. The choice of CGM device should be made based on the individual's circumstances, preferences, and needs. **B**

 Prediabetes

- Consider combining technology (CGM, insulin pump, and/or diabetes apps) with online or virtual coaching to improve glycemic outcomes in individuals with diabetes or prediabetes. **B**

 Pediatrics

- **rtCGM** or isCGM should be offered for diabetes management in youth with type 2 diabetes on multiple daily injections or insulin pumps. **E**
- Recommend **rtCGM A** or isCGM **C** for diabetes management to youth with diabetes on any type of insulin therapy.

 Older Adults

- **Recommend CGM for older adults with type 1 diabetes** to improve glycemic outcomes, **reduce hypoglycemia, and reduce treatment burden. A**
- Older adults with diabetes who are otherwise healthy with few, and stable coexisting chronic illnesses and intact cognitive and functional status should have lower glycemic goals (such as A1C <7.0–7.5%) and/or time in range [TIR] 70–180 mg/dL of <70% and time below range 70 mg/dL of ≤ 4%) if CGM is used. **C**

 Pregnancy

- CGM can help to achieve glycemic goals (e.g., time in range, time above range) **A** and A1C goal **B** in type 1 diabetes and pregnancy and may be beneficial for other types of diabetes in pregnancy. **E**
- **Recommend CGM to pregnant individuals with type 1 diabetes. A**
- In conjunction with aims to achieve traditional pre- and postprandial glycemic goals, **rtCGM** can reduce the risk for large-for-gestational-age infants and neonatal hypoglycemia in pregnancy complicated by type 1 diabetes. **A**
- CGM metrics may be used in combination with blood glucose monitoring to achieve optimal pre- and postprandial glycemic goals. **E**

Further Considerations

Hypoglycemia

- **Use of CGM is beneficial and recommended for individuals at high risk for hypoglycemia. A**
- Advise frequent glucose monitoring before, during, and after exercise, via blood glucose meter and/or CGM, to prevent, detect, and treat hypoglycemia associated with exercise. **C**

AID

- **AID systems should be the preferred insulin delivery method to improve glycemic outcomes and reduce hypoglycemia and disparities in youth and adults with type 1 diabetes A**

Behavior Modification

- In circumstances when consistent use of CGM is not feasible, consider **periodic use of personal or professional CGM to adjust medication** and/or lifestyle. **A**

Key Takeaways from ADA Standards of Care 2025

- ✓ **HCPs should offer** their patients **Dexcom CGM Systems at the onset of diabetes diagnosis** to improve glycemic outcomes and reduce complications that come from elevated glucose.
- ✓ **Dexcom CGM Systems** are clinically **proven to enhance glycemic outcomes for individuals of all ages**. Whether you're a youth, adult, older adult, or of childbearing age, Dexcom offers the vital support for effective diabetes management.
- ✓ Dexcom CGM Systems are proven to enhance glycemic outcomes for people with diabetes, regardless of their type of diabetes. Whether it's T1D, T2D, prediabetes, or diabetes during pregnancy, Dexcom provides the essential tools for effective diabetes management and a healthier future.
- ✓ **Dexcom CGM Systems are an essential tool for individuals at risk of hypoglycemia.**
- ✓ Patients can choose to connect to **multiple devices and health apps** – only with **AID** systems powered by **Dexcom CGM Systems**.

ADA Evidence–Grading System:

- Strong evidence from well-conducted, generalizable RCTs, multicenter trials, or meta-analyses.
- Supportive evidence from well-conducted cohort studies, case-control studies, or meta-analyses.
- Supportive evidence from poorly controlled or uncontrolled studies, including flawed RCTs, observational studies, or case reports.
- Expert consensus or clinical experience.