

TYPE 2 DIABETES MELLITUS · GLYCEMIC REMISSION

Achieve Diabetes Remission. *Clinically.*

Structured metabolic intervention. Supervised. Sustained.

- 16-Week Protocol
- Medication Tapering
- HbA1c: 8.4% → 5.9%

PATIENT OVERVIEW		
PATIENT	AGE	GENDER
Rajesh Verma	49 Years	Male
LOCATION	DIAGNOSIS	COMORBIDITIES
Gurgaon	Type 2 Diabetes Mellitus (5 years)	Central Obesity · Hypertension

Baseline Medication: Metformin 1000 mg/day · Occasional additional oral hypoglycemics

— CHIEF COMPLAINTS

Why He Came to Us

- Persistent Fatigue**
Low energy through the day
- Increased Thirst**
Persistent polydipsia
- Weight Management**
Difficulty losing weight
- Frequent Urination**
Especially pronounced at night
- Post-Meal Drowsiness**
Significant glucose spikes

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— BASELINE CLINICAL OBSERVATIONS

Where He Started

<p>8.4%</p> <p>HbA1c</p> <hr/> <p>Poor long-term glucose control</p>	<p>168 mg/dL</p> <p>Fasting Glucose</p> <hr/> <p>Well above normal fasting threshold</p>	<p>240 mg/dL</p> <p>Post-Meal</p> <hr/> <p>Significant post-prandial spike</p>	<p>Increased</p> <p>Abdominal Fat</p> <hr/> <p>Central adiposity confirmed</p>	<p>Poor/High</p> <p>Sleep & Stress</p> <hr/> <p>Contributing to metabolic burden</p>
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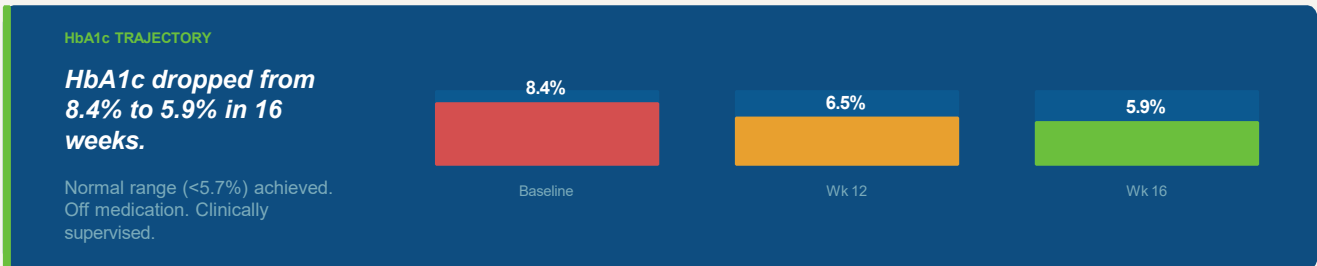
— HOLISTIC TREATMENT PROTOCOL

The Integrative Approach

<p>01  Lifestyle Modifications</p> <ul style="list-style-type: none"> • Early dinner — 12–14 hr overnight fasting window • Post-meal walking 10–15 mins daily • Strength training introduced gradually • Fixed sleep cycle: 7+ hours consistently 	<p>02  Nutrition Protocol</p> <ul style="list-style-type: none"> • Avoid: refined carbs, maida, sugary beverages • Low glycemic load meals throughout the day • High fibre: vegetables, seeds, whole grains • Adequate protein + healthy fats (nuts, ghee)
<p>03  Metabolic Correction</p> <ul style="list-style-type: none"> • Improve insulin sensitivity • Reduce post-meal glucose spikes • Support pancreatic beta-cell function • Reduce systemic chronic inflammation 	<p>04  Monitoring & Medication</p> <ul style="list-style-type: none"> • Weekly fasting + postprandial glucose tracking • HbA1c every 3 months • Weight and waist circumference monitoring • Medication tapering under clinical supervision

16-WEEK FOLLOW-UP PROGRESS

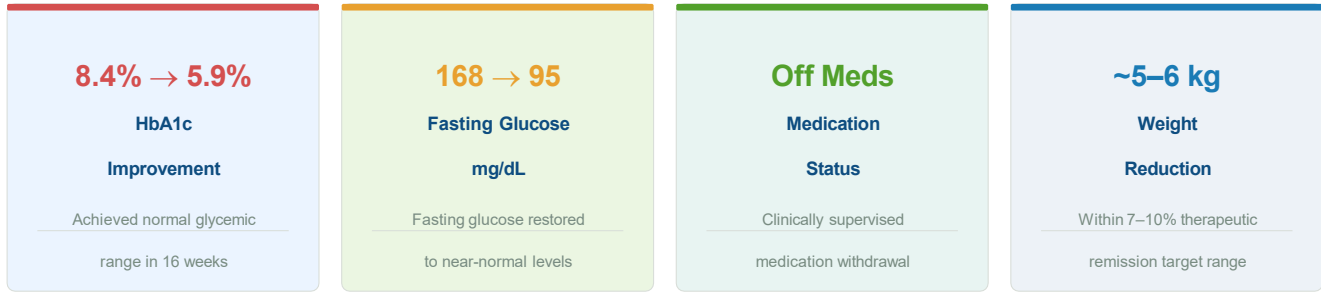
Rajesh's Journey — Milestone by Milestone



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— 16-WEEK CLINICAL OUTCOMES

What Changed — Measurably



OUTCOME ACHIEVED
Glycemic Remission — Normal blood glucose without medication, sustained. Week 16

— KEY CLINICAL INSIGHTS

What This Case Teaches Us

<p>⊕ T2D is Metabolic — Not Just Dietary</p> <p>Type 2 diabetes is driven by insulin resistance, chronic inflammation, and lifestyle burden. Metabolic correction addresses the root cause.</p>	<p>■ Structured Intervention Delivers Results</p> <p>Early, consistent, and supervised intervention can restore insulin sensitivity and achieve clinically meaningful glucose reduction.</p>
<p>■ 7–10% Weight Loss is Therapeutic</p> <p>This range is associated with restoration of insulin sensitivity and improvement in beta-cell function — supported by evidence.</p>	<p>■ Consistency Matters More Than Intensity</p> <p>Steady adherence to nutrition, movement, and sleep protocols — not extreme restriction — drives sustainable glycemic remission.</p>

IMPORTANT DISCLAIMER
 Diabetes remission is individual-specific and must be achieved under strict medical supervision. Medication changes must never be made independently.

L&B CLINICS · GET IN TOUCH

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