Approximately 85 million people in the United States have prediabetes which is defined as having a hemoglobin A1C between 5.7 and 6.4 percent. To prevent the development of type 2 diabetes, the American Diabetes Association (ADA) guidelines recommend patients with prediabetes to implement lifestyle modifications with or without the use of metformin. Metformin is reported to decrease hemoglobin A1C by 1 to 2 percent. In most cases, this small reduction in hemoglobin A1C is not sufficient, leading to the addition of another antihyperglycemic medication. Over-the-counter ginger root supplementation is often utilized for a variety of conditions and is the seventh most commonly purchased herbal supplement in the United States. It has reportedly been used to treat nausea and vomiting, gastrointestinal irritation, inflammation and pain. The efficacy of this herbal product has not been fully elucidated in clinical trials, although animal studies reveal multiple pharmacologic mechanisms suggesting it may have a role in the treatment of diabetes. Published data from a small placebo-controlled trial demonstrated that 1100 mg of ginger root taken twice daily can decrease hemoglobin A1C by 0.7 to 0.8 percent in patients with diabetes. We report a case of a 47 year old male patient who used ginger root to decrease his hemoglobin A1C from 6.1 to 5.6 percent, an absolute decrease of 0.5 percent and a relative decrease of 8.2 percent from baseline. The patient weighed 97 kilograms and had no significant past medical history. Over 16 months his baseline fasting plasma glucose ranged from 108 to 124 milligrams per deciliter with a hemoglobin A1C increasing from 5.6 to 6.2 percent. He was prescribed extended-release metformin 500 mg twice a day for four months and was self-reportedly fully compliant. During this time period, the patient also began lifestyle modifications, including dieting and exercising. After four months of treatment with metformin, the patient’s hemoglobin A1C was 6.1 percent, a 0.1 percent decrease. The patient then began to take ginger root 1100 mg twice daily along with metformin. After 4 months of taking ginger root in combination with metformin, the patient’s hemoglobin A1C decreased from 6.1 to 5.6 percent, and he had a reported weight of 95 kilograms with a fasting plasma glucose of 112 milligrams per deciliter. A patient interview revealed he did not implement any significant lifestyle changes or start a new supplement since starting metformin. It seems unlikely this 0.5 percent reduction in hemoglobin A1C could be attributed to metformin and lifestyle modifications alone, and the observed reduction in hemoglobin A1C is consistent with previously published data on the efficacy of ginger root. Currently, the ADA guidelines do not mention ginger root supplementation as an option to decrease hemoglobin A1C. Further studies are warranted to evaluate the role of ginger root in decreasing hemoglobin A1C.