The goal of the study is to estimate the connection between socioeconomic status, lifestyle and quality of glycoregulation in patients with diabetes in the Republika Srpska (RS). The study included 1088 people, aged 18 or older, chosen randomly from available registries of patients with Diabetes mellitus Type 1 (DM1) and Type 2 (DM2) in the primary health clinics. The study included 4.6% patients with DM1 and 95.4% with DM2. Socioeconomic status was estimated based on parameters of social standing. There were 61.8% of study subjects from single-income households. The main source of income in 60% of participants was their pension. Total monthly income of 62.3% participants was under US $324. Poor glycoregulation (HbA1c≥6.5%) was seen in 61.8% participants. There were 51.8% without education beyond partial or complete high school education, and they had a worse glycoregulation ($\chi^2=15.650$, df=16, p=0.016). Items with saturated fats and sugars dominated their daily food intake. Rhythm of 5-6 meals per day is present in 18.0% study subjects. Participants with DM1 consume breakfast more often, with statistically significant difference ($\chi^2=6.667$, df=2, p=0.036), as well as dinner ($\chi^2=9.969$, df=2, p=0.007), in comparison with participants with DM2. The ideal Healthy Diet Score was noted in only 7.5% of participants, daily physical activity in 35.6% of subjects, 15% were smokers, and 63.5% reported alcohol consumption. Stratification of patients with DM in RS based on socioeconomic status, vocational status and education, type of nutrition, alcohol consumption frequency, smoking, and physical activity follow the status of undeveloped countries in the world, which among other factors explains poor glycoregulation.