Concurrent paper sessions, Friday, 1.30 pm

24 Type 2 diabetes

The experience of living with type 2 diabetes in Australia today

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Aims and rationale

Australia faces an epidemic of type 2 diabetes. The project aims to address the question 'What are the experiences and views of people living with type 2 diabetes?'

Methods

Pubmed was searched using the MeSH string 'Diabetes Mellitus, Type 2' AND ('Consumer Satisfaction' OR 'Cost of Illness' OR 'Quality of Life') for articles published in English 1/1/2005 to 30/10/2010. The abstracts of all 599 articles retrieved were read and those that addressed the research question were selected for thematic analysis of the full papers.

Thematic analysis of 18 interview transcripts with diabetics from the database of the Serious and Continuing Illness Policy and Practice Study was undertaken.

Findings

The most frequently recurring themes from both the literature review and the SCIPPS interviews were financial impact, adequacy of information/education on the illness, access to health services, communications/relationship with health providers, diet/lifestyle changes, and concerns about complications/death. Other frequently occurring themes include medications, impact on mood, continuity of care, individualised patient care, and time constraints.

Additional issues identified in the SCIPPS database included impact on career, vague symptoms such as tiredness, preventative medicine, competence of the health professional, teamwork, support groups, motivation, balancing priorities, denial vs shock on initial diagnosis, experiencing stigma, and the regular use of needles.

Benefits to the community

Diabetics in Australia continue to face multiple challenges in the management of their disease. Health care professionals need to consider the issues identified above as current health care reforms do not adequately address these issues.

Yvonne Wang is an academic GP registrar at the Department of General Practice, University of Sydney's Westmead, with special interests in diabetes and preventative medicine.

A national survey on the management of type 2 diabetes in general practice

Moyez Jiwa¹, Jeff Hughes¹, Stephen Coalgiuri², Tim Shaw², Timothy Skinner³, Stephen Twigg², Satvinder Dhaliwal¹ ¹Curtin University, ²University of Sydney, ³Flinders University

Aims and rationale

Diabetes is the commonest chronic disease managed in general practice. The aim of this study was to explore how a variety of clinical and demographic variables impact on the likelihood of GPs tailoring the management of cases.

Methods

A structured vignette survey was conducted in Australia. Respondents were invited to complete self-administered questionnaires containing nine vignettes or patient histories chosen at random from a pool of 128 based on seven clinical variables. Respondents were asked if they would recommend a change in treatment, a statin, an oral hypoglycaemic, an antihypertensive and or lifestyle advice. Logistic regression was used to estimate the independent effects of each variable on the respondent's judgement relative to the recommendations of two specialists in diabetes care.

Findings

Forty per cent of the 117 respondents were in agreement with the experts in more than 80% of cases overall. Respondents were asked the following questions and the proportion of the respondents who agreed with the experts in 80% or more of their responses to nine different vignettes is shown in brackets: Recommend a change in the patient's treatment (54.08%); Prescribe a Statin for this patient (58.26%); Prescribe or change oral hypoglycaemic for this patient (40.71%); Prescribe an antihypertensive drug for this patient (40.26%); Refer for lifestyle modification (73.75%). Regression analysis failed to identify any GP demographic factors which made it more or less likely that GPs would agree with experts.

Benefits to the community

The data suggest considerable scope to improve the advice offered to people with diabetes in primary care.

Professor Moyez Jiwa is a general practitioner and the inaugural Professor of Health Innovation at the Curtin Health Innovation Research Institute.



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