## Doctor.

## Care plans work for diabetes<sup>1</sup>

19 August, 2013 David Brill

They might be laborious, but GP management plans and team care arrangements do yield important clinical benefits for patients with diabetes, Australian research finds.

Patients who received care under Medicare's chronic disease management scheme — backed up with regular check-ups by their GP — had significant reductions in HbA<sub>1C</sub>, LDL cholesterol and BMI up to 18 months later, a study showed.

They also had small drops in total cholesterol and diastolic blood pressure, according to the research, published this week in the *Medical Journal of Australia*.

Study author Professor Grant Russell, head of Monash University's school of primary health care, said it confirmed that "systematic care for diabetes works".

"If you make a plan and keep to it, more of the recommended tasks are done. We've known for 10 years that [systematic care] can make a difference, but the challenge has been putting it into practice."

Professor Russell and colleagues followed up 577 patients with type 1 or type 2 diabetes who had a GP management plan created between 2008 and 2012.

GPs used an online management system called cdmNet, which creates systematic, individualised plans for patients and sends test reminders.

The improvement in clinical measures correlated clearly to the frequency of GP reviews:  $HbA_{1C}$  values fell by 0.4% (4.8mmol/mol) on average in patients who were reviewed twice or more within a year of their original care plan, including once within the first three months.

Their BMI fell by 0.5kg/m<sup>2</sup> and LDL-C by 0.4mmol/L.

In those reviewed less regularly or not at all, by contrast,  $HbA_{1C}$  and LDL did not change significantly.

Professor Mark Harris, head of the University of NSW's Centre for Primary Health Care and Equity, said the maximum benefit appeared to come when management plans were backed up by team care arrangements and allied health referrals.

"Having a care plan on its own is not so good, but having one with a team care arrangements and reviews makes a difference," he said.

"This is another plank in the evidence that care plans are useful and associated with improvements in quality of care."

Professor Russell said the research "opened the door" to longer, more substantial studies looking at hard endpoints such as diabetes complications and mortality.

One of the study authors is the CEO of the company that manufactures cdmNet, but the study was conducted "at arm's length", Professor Russell said.

It was funded by the Federal and Victorian governments.

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 $<sup>^{1}\,\</sup>underline{\text{http://www.australiandoctor.com.au/news/latest-news/care-plans-work-for-diabete}}s$