EVALUATING THE MANAGEMENT OF TYPE 2 DIABETES IN THE PRIMARY CARE SETTING THROUGH A NOVEL MULTI-STEP NEEDS ASSESSMENT PROCESS

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OBJECTIVE: To uncover real-life gaps in treating type 2 diabetes (T2DM) in primary care. METHODS: Between January and October, 2012, primary care practitioners (PCPs) were invited to participate in a needs assessment consisting of: 1) online questionnaires assessing participants’ perception of T2DM practice; 2) focus group sessions to discuss questionnaire findings; 3) electronic submission of treated T2DM patients’ profiles with follow-ups at two subsequent visits to assess actual practice. RESULTS: 157 participating PCPs submitted 1,459 baseline visit, 1,016 follow-up visit #1 and 977 follow-up visit #2 profiles. At baseline, 43% of 1,459 patients were not at A1C target of ≤7.0%; 33% of these patients were on monotherapy. By the end of assessment, 63% of the 691 patients with known A1C at follow-up visit #2 had A1C ≤7.0%, including 37% of the 345 patients not at A1C target at baseline followed for 2 subsequent visits. Only 7% of the 258 patients not meeting targets at follow-up visit #2 were on monotherapy. Subsequently, cases representing the most common challenges identified were integrated in several educational programs, designed to generate discussion on challenges in real practice settings and promote changes in managing T2DM patients to overcome identified practice gaps. DISCUSSION: While there was a trend to add antihyperglycemic medication leading to subsequent improvement in A1C, there are still many challenges associated with therapeutic inertia and achieving A1C targets in primary care. This initiative demonstrates a novel needs assessment technique, with tailoring of an educational program based on identified real-life gaps in diabetes management.