



Service Priorities and Programmes
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Do our diabetic patients know about the glycaemic goal – the HbA1c?

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Introduction

HbA1c is widely adopted as the standard biomarker for glycaemic control in diabetic patients, since it correlates well with both microvascular and macrovascular complications. The American Diabetes Association (ADA) recommends the HbA1c level of diabetic patients should be controlled at a level of 7% or below, and this should be one of the treatment goals for both the doctors and patients. However, a local study in 2012 found that over 70% of type 2 diabetic patients have not heard of the term HbA1c, while over 90% of patients do not know their optimal HbA1c target of 7%.

Objectives

To assess the knowledge of diabetes patients on glycaemic control in terms of HbA1c

Methodology

The diabetic patients were randomly selected and interviewed by nurses or clinical assistants during their clinic visits in Cheung Sha Wan JC General Out-Patient Clinic from July to October 2013. They were assessed if they had ever heard of the term HbA1c / 糖化血紅素 in Chinese, whether they could recall their recent HbA1c level and if they knew the optimal goal of 7%.

Result

194 patients were interviewed (M:F = 85:109), who aged from 38 to 92 (averaged 65.8 years). They were diagnosed to have diabetes for few months to 48 years (1 standard deviation as 7 years). 46 patients (23.7%) heard of the term HbA1c / 糖化血紅素, among which 16 patients could recall their recent HbA1c reading and 7 patients knew the glycaemic goal of 7%. Only three patients (1.55%) knew the “7%” goal and their own figure simultaneously. They aged 52, 54 and 80, and were diagnosed to have diabetes within 2 years. In recent years, patient education on diabetes management has been much enhanced in primary care with introduction of various

multi-disciplinary programmes such as Risk Assessment & Management Programme (RAMP) and Patient Empowerment Programme (PEP). However our pilot study revealed that less than one quarter of the interviewees have not heard of HbA1c, which is one of the most important goals of their glycaemic control. Even smaller proportion of these patients actually knew their optimal HbA1c target. This suggests a potential area of deficiency in patient education which warrants our more proactive efforts in improving patients' insight and motivation in disease management.