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Clinical and diabetic control among patients with diabetic retinopathy at a primary care setting

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Introduction

Diabetic retinopathy (DR) screening in Kowloon West Cluster (KWC) started in 2010. As the DR screening service had been running for a few years in our Department, the investigators are interested to explore the profile and diabetic control among those patients who are RP screening positive.

Objectives

To evaluate the profile and diabetic control of a group of DM patients who were screened positive for maculopathy at the DR screening service in the year 2013 at our local primary care setting.

Methodology

Screening data from January to December 2013 were collected from the DR screening centre at the West Kowloon GOPC, which serves 5 KWC GOPCs. The patients with their fundus photos graded "maculopathy" were included. Patients with incomplete clinical data were excluded. Parameters for analysis were collected from the Clinical Management System (CMS).

Result

5,030 records were retrieved. 147 patients (M: 70 & F:77) were graded as "maculopathy" in either eye or both eyes during the year 2013. The mean age of the patient was 66. Their DM onset time ranged from 1970 to 2013. BMI (target: 25) Mean BMI was 24.7. 56 patients (38%) with BMI over 25.0. 16 patients who had their BMI never been recorded at our GOPC visits (capture rate of BMI was 131/147 = 89%). BP (target: 130/80 mmHg) Capture rate for BP was 100%. The mean SBP was 134 mmHg and DBP was 72 mmHg. 89 patients (61%) with BP above 130/80 mmHg. a1c (target: 7%) a1c capture rate within 12 months was 72%. Two a1c levels included in the analysis (the latest a1c level "new a1c" & the immediate previous a1c level "old a1c"). The average "new a1c" was 7.5% and "old a1c" was 7.9%. Among the "new a1c", 78 (53%) achieved the target a1c 7%, which was comparable with the performance within our cluster (53%) and other clusters (54%). LDL (target: 2.6

mmol/L) Mean LDL was 2.6. 94 patients (63%) met the target of LDL 2.6. Co-morbidities 29 patients (20%) had estimated GFR below 60 ml/min/1.73m² and 25 patients (17%) were screened neuropathy positive. Treatment modalities 134 patients (91%) were on metformin. 12 patients (8%) were on insulin. 13 patients (9%) were on DPP-4 inhibitors (9%). Conclusion The overall background characteristics and control performance of a selected group of DR screening positive patients at KWC GOPD was reviewed. There is still room for improvement such as to increase the capture rate of several clinical parameters in order to have better disease monitoring, and to enhance utilization of pharmacological (i.e. insulin & oral hypoglycemic agents) as well as non-pharmacological (i.e. lifestyles measures with allied health support) for improvement in DM control. Further investigation Analysis of the patients with other DR grades in addition to maculopathy screening positive patients could be done for comparison. In the future, a longitudinal study of the above group of patients could be of high clinical interest to evaluate the change and progression of their condition in terms of their DMR status as well as their DM control in terms of clinical parameters and the development of co-morbidities.