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Title: Kuwait Diabetes Care Programme is an Effective Improvement of Diabetes Care Services.

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Abstract Text:

Objective: To evaluate the effectiveness of Diabetes Care Programme (DCP) at the Primary Health Care (PHC) in Kuwait and the adherence to the clinical standards recommended by the programme.

Methods: Kuwait DCP is a national programme established by the CDPHC to improve services at the PHC level. Interventions included development and distribution of clinical practice guidelines, development and distribution of standards for diabetes care, and conduction of continuing medical education programme through training course and workshop for implementation of these standards (interventions were done on March-April 2001). First audit was conducted retrospectively before onset of programme (September 1999) and the second audit was conducted 6 months after the interventions (October 2001) as part of the continuous monitoring system survey. Medical records (250 files) were reviewed pre- and post-intervention. The standards selected for this study included the prevalence of smoking assessment, fundus examination, foot examination, and determination of urine for Microalbumin, serum Creatinine, HbA1c level and lipid profile.

Results: There was a significant improvement in implementation of all the studied standards. The prevalence of smoking assessment increased significantly from 2.8 % to 11.6% ($p < 0.0001$); the prevalence of conducting fundus examination increased significantly from 2.4 % to 6.8% ($p < 0.01$); the prevalence of conducting foot examination increased significantly from 0.4 % to 14 % ($p < 0.0001$); the prevalence of urinary microalbumin determination increased significantly from 4.4 % to 16.0 % ($p < 0.0001$); the prevalence of measuring serum creatinine increased significantly from 16 % to 42 % ($p < 0.0001$); the prevalence of measuring HbA1c values increased significantly from 10.4 % to 30.4 % ($p < 0.0001$); the prevalence of measuring lipid profile increased significantly from 2.4 % to 8.4 % ($p < 0.01$); the prevalence of measuring serum total cholesterol levels increased significantly from 16.4 % to 36 % ($p < 0.0001$); and the prevalence of measuring serum triglycerides increased significantly from 14.4 % to 36 % ($p < 0.0001$).

Conclusion: Kuwait Diabetes Care Programme is an effective model for improvement of diabetes care services. Support from Health authorities, continuous monitoring and evaluation system are crucial for improving adherence to implementation of clinical standards.