


New Zealand Permit No. 176761 **Permit** 

# Sample

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Monitoring

# Diabetes

in people over 75

In the March 2012 issue of Best Tests, bpac<sup>nz</sup> published an article discussing testing for CVD, diabetes and renal disease in elderly people. This article suggested that many laboratory tests become more difficult to interpret in elderly people because of the effects of medicines and declining general health. However, monitoring diabetes remains important for elderly people due to its long-term degenerative nature and associated co-morbidities and complications.

## Recommendations for monitoring diabetes in people aged over 75 years

It is recommended that patients with diabetes receive an annual diabetes review including testing of HbA<sub>1c</sub> and microalbumin to calculate an albumin/creatinine ratio.<sup>1</sup> This report will discuss whether these tests are being requested at an appropriate rate for elderly people (aged over 75 years) with diabetes. The data in this report is for all patients dispensed either oral medication or insulin for diabetes, and the HbA<sub>1c</sub> and microalbumin tests requested for those patients. The data in this report was sourced from the Ministry of Health National Collections.<sup>2,3</sup>

### National data by ethnicity

#### Appropriate testing of HbA<sub>1c</sub>

In elderly people with diabetes, HbA<sub>1c</sub> should be tested annually as part of an annual diabetes review.<sup>1</sup> Some patients may need to be tested more often; however more frequent testing is not necessary in patients with stable, well controlled diabetes.

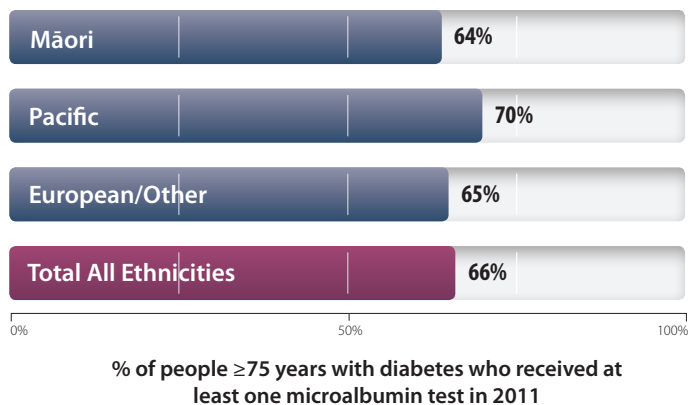
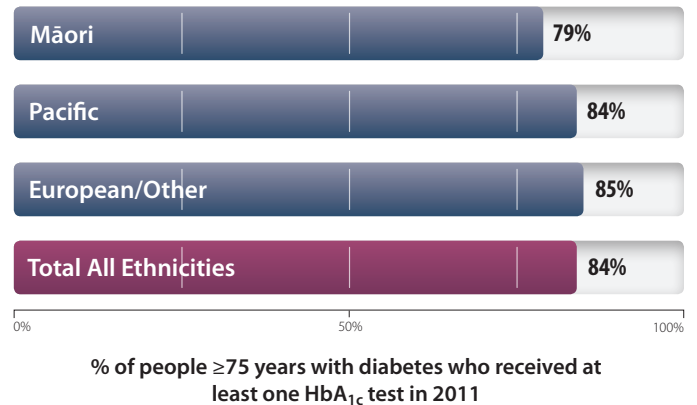
Ongoing HbA<sub>1c</sub> testing is important for monitoring glycaemic control and predicting the risk of further complications.

#### Testing for microalbuminuria

Diabetic nephropathy is one of the most common forms of chronic kidney failure in the developed world and occurs in more than 30% of people with diabetes.<sup>4</sup> Diabetic nephropathy generally takes six to 15 years to develop and therefore is more prevalent in older people with a long history of diabetes.<sup>4</sup>

Microalbuminuria is the first sign of nephropathy, but not all people with microalbuminuria will progress to full nephropathy. If detected early, microalbuminuria can be reversible with good glycaemic control and management of blood pressure.

Nationally, the rate of microalbumin testing in elderly patients is lower than we would expect. In older patients, the specificity of the albumin:creatinine ratio is reduced,<sup>5</sup> however it remains the best way to detect early stage microalbuminuria and regular monitoring is important in people with diabetes, regardless of their age.



### Sample Feedback

**20** patients ≥75 years dispensed diabetes medicine in 2011



Your personal feedback is based on data where your NZMC number was recorded as the provider.

1. Diabetes New Zealand. Annual diabetes check-up. Available from: [www.diabetes.org.nz](http://www.diabetes.org.nz) (Accessed May, 2012).

2. Ministry of Health. Pharmaceutical Collection. (Accessed May, 2012).

3. Ministry of Health. Laboratory Claims Collection. (Accessed May, 2012).

4. Philips A. Diabetic nephropathy. *Medicine* 2011;39(8):470-4.

5. Houlihan C, Tsalamandris C, Akdeniz A, Jerums G. Albumin creatinine ratio: a screening test with limitations. *Am J Kid Dis* 2002;38(6):1183-9.

\* National data excludes Nelson Marlborough DHB and South Canterbury DHB areas due to laboratory data recording discrepancies in these areas.