

DIABETES CARE & OUTCOMES

Urban Audit Summary Brief, 2018



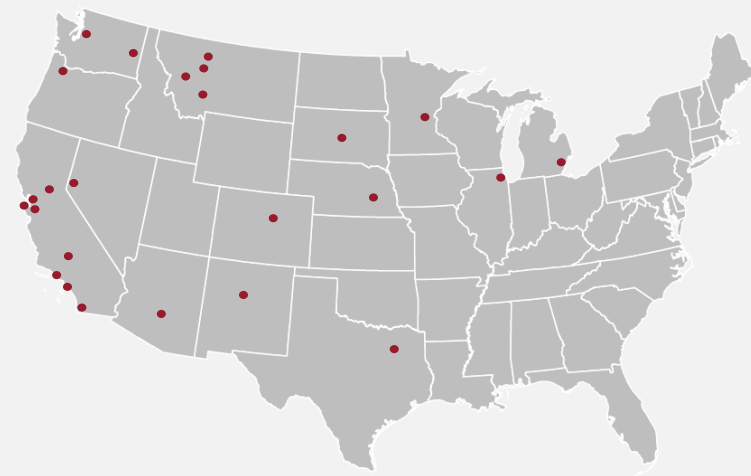
Urban Indian Health Institute
A Division of the Seattle Indian Health Board



BACKGROUND

The Special Diabetes Program for Indians (SDPI) was created in 1997 by the US Congress to respond to the growing burden of type 2 diabetes in American Indian and Alaska Natives (AI/ANs).¹ SDPI supports culturally-adapted and community-directed approaches to diabetes prevention, including the funding of the *Urban Diabetes Care & Outcomes Summary Report, Audit Years 2014-2018* (2018 Urban Diabetes Audit). Since 2009, the Urban Indian Health Institute has analyzed diabetes data from Urban Indian Health Programs (UIHPs). This data comes from Indian Health Services and shares a comprehensive picture of diabetes healthcare in urban AI/AN communities.

Map 1. Urban Indian Health Programs in Diabetes Audit, 2018



KEY FINDINGS²

In 2018, 2,130 urban AI/AN patients with diabetes were audited across 25 UIHPs (Map 1). The key findings among urban AI/AN patients with diabetes were:



7 in 10 of patients had an eGFR of 60 ml/min/1.7m² or higher, indicative of no chronic kidney disease.



20.5% of patients were not tested for eGFR.



Mean systolic and diastolic blood pressures in the patients were 130.8 and 78.5 mmHg, respectively, indicating good blood pressure control overall.



79.8% of patients with a diagnosis of hypertension were prescribed ACE inhibitors or ARBs.



30.5% received a dental exam.



33.8% ever received a hepatitis B vaccine.



78.0% who were current tobacco users were referred to or received cessation counseling.



25.5% of patients were currently using tobacco.



74.2% of patients had an unknown tuberculosis status.

KEY TRENDS²

The proportion of urban AI/AN patients with diabetes significantly[†] **increased** from 2014 to 2018 for those:

- ↑ Who were aged 55 years or older.
- ↑ Who did not receive an eGFR test.
- ↑ **Who received a dental exam.**
- ↑ Who had an A1c of 8.0% or higher.
- ↑ **Who received a hepatitis B vaccine.**

The proportion of urban AI/AN patients with diabetes significantly[†] **decreased** from 2014 to 2018 for those:

- ↓ Who had an A1c less than 7.0%.
- ↓ **Who were currently using tobacco.**

[†]The trends in proportion of patients over time were analyzed using Joinpoint Regression Program version 4.6.0.0. Results were considered statistically significant for p-values less than 0.05.



RECOMMENDATIONS

This report aims to identify and share key findings in diabetes care and outcomes for urban AI/AN patients. Recommendations based upon these key findings help programs achieve success in diabetes care and prevention and ultimately improve health outcomes for urban AI/AN patients.

Programmatic Effort

- Programs may need to prepare for an aging diabetes population that will have unique health needs due to an increase in those aged 55 and older.
- Continue successful program efforts in maintaining healthy eGFR levels in diabetes patients, maintaining good blood pressure in diabetes patients, prescribing of ACE inhibitors or ARBs to those with hypertension, and referring tobacco users to cessation counseling.

Research

- Further research to address the increasing A1c levels among diabetes patients may be warranted to better understand this upward trend and provide better care.

Prevention Funding

- Continue to expand on the successful support of current programmatic efforts encouraging diabetes patients to receive an annual dental exam.
- Continue to expand on the successful support of current programmatic efforts encouraging diabetes patients to receive the hepatitis B vaccine.

Data Collection

- Continue to gather health information to ensure diabetes patients are regularly screened for tuberculosis and chronic kidney disease which can assist in minimizing gaps in patient screening.

References

1. Indian Health Service. Special Diabetes Program for Indians. Available at: <https://www.ihs.gov/sdpi/>. Accessed March 5, 2019.
2. Indian Health Service, Diabetes Care and Outcomes Audit, 2014-2018