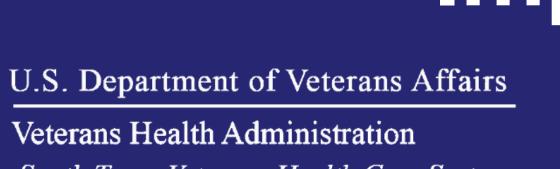
Implementation of an Assessment and Curriculum to Reduce Diabetes Distress in a Primary Care Setting



South Texas Veterans Health Care System, San Antonio, TX

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Background

- Diabetes distress refers to the negative emotions and stress due to living with diabetes mellitus and its complications (1).
- Elevated levels of DD often lead to poor medication compliance and increased hemoglobin A1c levels, which over time contribute to higher rates of complications and mortality (2).
- South Texas Veterans Health Care System serves approximately 24,000 veterans with diabetes, of which 8,600 are estimate to have diabetes distress (3).
- The ADA's "Standards of Medical Care in Diabetes-2022" recommends that people with diabetes be regularly screened for diabetes distress and if positive, be referred for distress specific education (4).

Objective

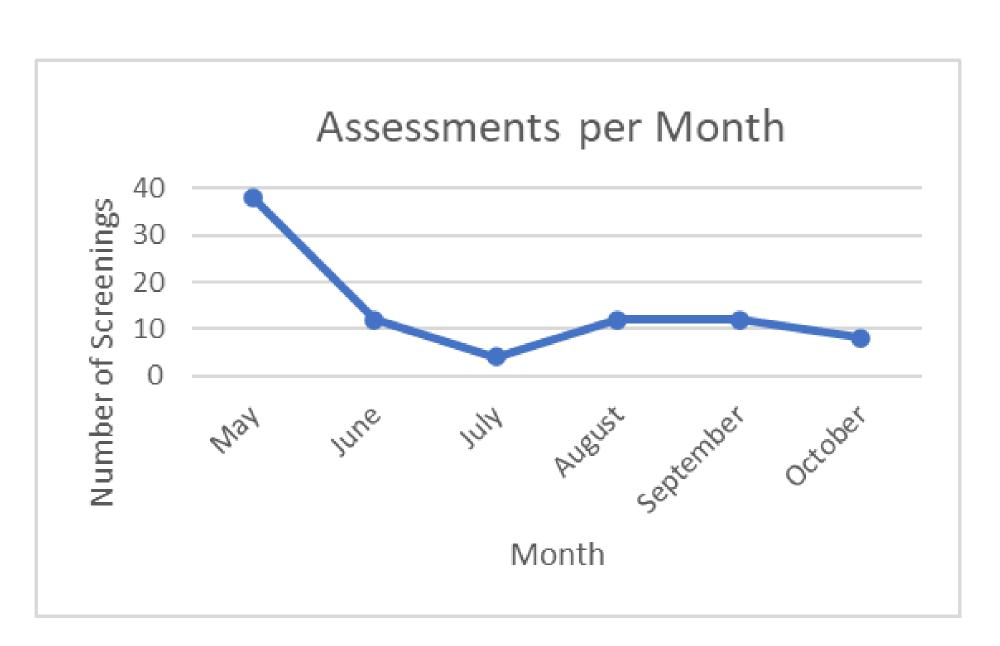
- The intent of this project was to provide diabetes self-management and care education consistent with ADA guidelines.
- The first goal was that 90% of patients presenting for outpatient diabetes education would be assessed for diabetes distress.
- The second goal was that 100% of patients with elevated diabetes distress would be referred for distress specific education.

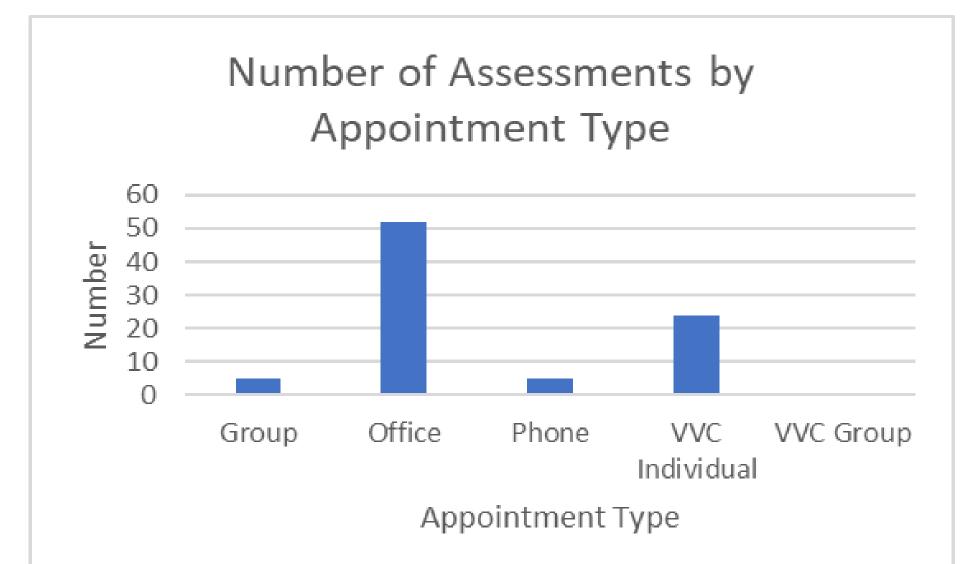
Methods

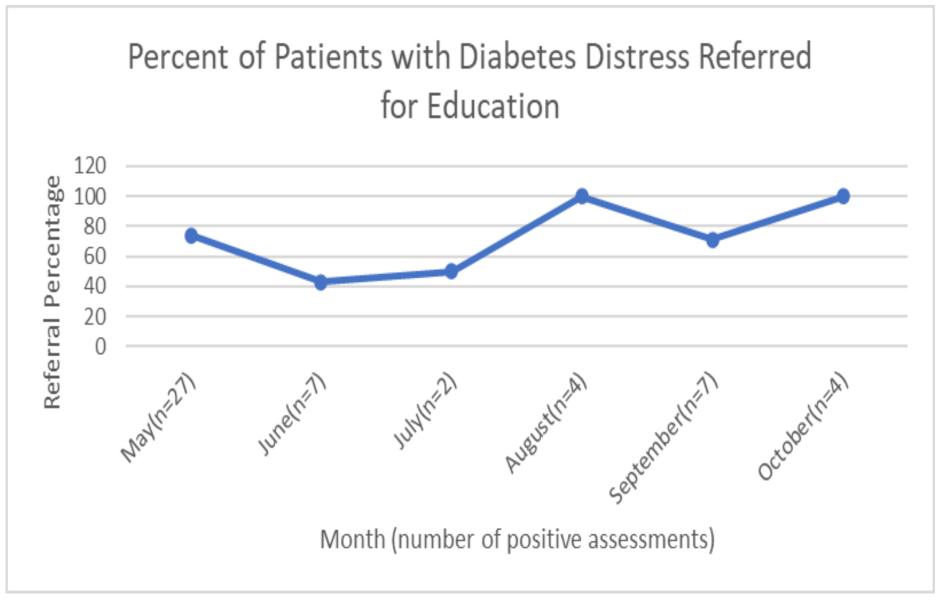
- Assessment
 - Diabetes Distress Scale and Type 2
 Diabetes Distress Assessment System utilized
 - 2-6 minutes to complete
 - Chart audits to track completion rate
- Curriculum
 - Literature search to identify best practices and methods
 - Focused on sources of distress found by assessment
 - Individual and group teaching

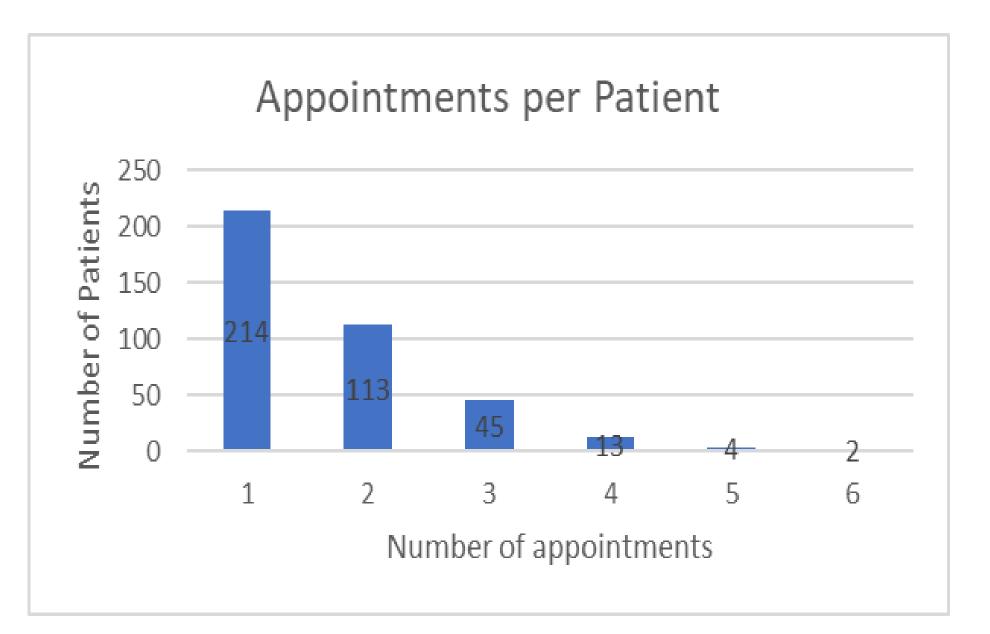
Results

- 354 patients (37 with prediabetes were excluded) were seen between May 1, 2022 and October 31, 2022
- 658 total patient visits
- 86 patients (24%) were assessed for diabetes distress
- 51 patients had elevated levels of distress, and 37 of those were referred for additional education (73%)
- 4 group classes with diabetes distress curriculum, 21 patients attended









Discussion

- In person group classes resumed Oct 2022, and was the most practical setting for distress assessment.
- Results are consistent with other surveys, but limited data on assessment usage and best practices available.
- Distress assessment was unable to be completed during virtual group appointments due to technology and privacy constraints

Recommendations

- Diabetes distress is very common in this population
- It is difficult to predict who has diabetes distress without a standardized assessment
- Assessment works best with in-person visits
- Since most patients only have one visit with educators, must prioritize patient needs
- Diabetes distress is very amenable to intervention

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