

# Hospital diabetes care standards not met by US academic medical centers

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A benchmarking study published in the *Journal of Hospital Medicine* evaluated contemporary hospital glycemic management in United States academic medical centers, determining glucose control practices are suboptimal and do not meet current American Diabetes Association (ADA) hospital diabetes care standards.

The retrospective cohort study was based upon a 2005 collaborative project by The University HealthSystem Consortium, an alliance of 103 academic health centers and 119 associated hospitals. The study found wide variation in performance of the recommended hospital diabetes care measures. Recommendations and guidelines from the ADA include the use of intravenous insulin to control hyperglycemia in critically ill patients, but the study found that intravenous insulin was used in less than half of ICU patients involved in the study.

"With the prevalence of diabetes in hospitalized adult patients ranging from 12 percent to 25 percent, it's vital for hospitals to use effective insulin therapy to control glucose levels in acutely ill patients." says Jeffrey B. Boord, MD, MPH, lead author of the study. "Tight glucose control can improve patient outcomes and decrease hospital stay."

Intravenous insulin use is associated with better overall glucose control in the study. The findings also indicate the need for more research into other opportunities to improve hospital care practices, such as standardized protocols for subcutaneous basal/bolus insulin regimens and increased frequency of A1C testing.

This study is published in *Journal of Hospital Medicine*.

[www.journalofhospitalmedicine.com/](http://www.journalofhospitalmedicine.com/)

Source: Wiley

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