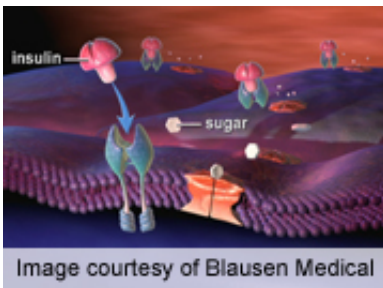


Inpatient diabetes education linked to lower readmissions

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(HealthDay)—Inpatients diagnosed with diabetes who receive inpatient diabetes education (IDE) have significantly lower frequency of all-cause hospital readmission within 30 days, according to a study published in the October issue of *Diabetes Care*.

Sara J. Healy, M.D., from Ohio State University Wexner Medical Center in Columbus, and colleagues conducted a [retrospective analysis](#) using data from inpatients with a discharge diagnosis of diabetes and hemoglobin A1c (HbA1c) >9 percent who were hospitalized between 2008 and 2010. Certified diabetes educators or trainees conducted IDE. The 30-day and 180-day analyses included 2,265 and 2,069 patients, respectively.

The researchers found that the frequency of readmission within 30 days

was significantly lower for patients who received IDE versus those who did not (11 versus 16 percent). Even after adjustment for sociodemographic and illness-related factors the significant relationship persisted (odds ratio, 0.66). In this model, Medicaid insurance and longer stay were also independent predictors of readmission. IDE was also linked to decreased readmissions within 180 days, but the correlation was attenuated. In the final 180-day readmission model, independent correlations were seen for no IDE, African American race, Medicaid or Medicare insurance, longer stay, and lower HbA1c with increased hospital readmission.

"Formal IDE was independently associated with a lower frequency of all-cause hospital readmission within 30 days; this relationship was attenuated by 180 days," the authors conclude.

More information: [Abstract](#)
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