

Quality improvement strategy ups achievement of T2DM goals

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(HealthDay)—A multicomponent quality improvement (QI) strategy can



improve achievement of diabetes care goals in a population of type 2 diabetes patients with poor cardiometabolic profiles, according to a study published online July 12 in the *Annals of Internal Medicine*.

Mohammed K. Ali, M.B.Ch.B., from Emory University in Atlanta, and colleagues compared the effect of a multicomponent QI strategy versus usual care on the cardiometabolic profile in poorly controlled diabetes in clinics in India and Pakistan. A total of 1,146 patients with type 2 diabetes and poor cardiometabolic profiles were randomized to intervention (575 patients) or usual care (571 patients).

The researchers found that the primary outcome of glycated hemoglobin (HbA1c) of less than 7.0 percent plus blood pressure (BP) of less than 130/80 mm Hg and/or low-density lipoprotein cholesterol (LDL-C) less than 100 mg/dL was achieved by more intervention participants (18.2 versus 8.1 percent; relative risk, 2.24) over a median of 28 months. Intervention participants also had larger reductions in HbA1c levels, systolic BP, diastolic BP, and LDL-C levels compared with usual care, and reported higher health-related quality of life and satisfaction with treatment.

"Multicomponent QI improves achievement of diabetes care goals, even in resource-challenged clinics," the authors write.

One author disclosed financial ties to Novo Nordisk.

More information: <u>Full Text (subscription or payment may be required)</u>

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