

Robocalls improve diabetes eye screening among low-income minorities

March 19 2018

Automated reminder calls may be an effective tool to improve screening for diabetic eye disease among low-income minority patients, especially African Americans, a new study finds. The study results will be presented Monday at ENDO 2018, the Endocrine Society's 100th annual meeting in Chicago, Ill.

In adults with diabetes, vision loss due to the disease is common but is often preventable through regular eye exams that include visualization of the retina at the back of the eye.

"Retinal <u>screening</u> can detect signs of <u>diabetic eye disease</u> such as diabetic retinopathy before vision loss occurs and progresses to blindness," said the study's senior investigator, Eli Ipp, M.D., professor and head, Section of Diabetes and Metabolism, Los Angeles Biomedical Research Institute (LA BioMed) at Harbor-UCLA Medical Center, Torrance, Calif. "Yet screening rates for diabetic retinopathy are low in low-income, minority patients."

In a 2016 survey of low-income patients, Ipp and others at LA BioMed found that African Americans reported past-year retinal screenings half as often as Latinos did, despite their physicians telling them screening was important.

Trying to improve diabetic retinopathy screening rates among poor minorities in this new study, Ipp and his research team tested the effect of telephone reminders given to 288 patients with diabetes: 200 Latinos



and 88 African Americans. The patients were from a safety net clinic for uninsured and Medicaid (Medi-Cal) patients, which is part of the Los Angeles County Department of Health Services. The phone reminder encouraged patients to attend a previously scheduled appointment to get retinal photos taken as part of a diabetes retinal screening program.

Of the patients, 176 received a prerecorded automated phone call, or <u>robocall</u>, reminder, in both English and Spanish, and the other 112 patients did not. Those who did not get a robocall received usual care, consisting of a personal call from a clinic staff member, Ipp said. The researchers then tracked the "show rate," the percentage of patients who showed up at the clinic for screening.

Usual care resulted in a show rate of 46.3 percent, whereas 59.9 percent of patients who received robocalls came for retinal screening, a statistically significant difference, Ipp said. When the researchers looked at the show rate by ethnicity/racial group, they also found a difference. Among African Americans, the show rate with usual care was reportedly only 23.6 percent, compared with 51.6 percent—more than double—after a robocall. Among Latinos, a robocall increased the show rate more modestly, according to Ipp, from 55.8 percent with usual care to 61 percent.

"Robocalls, a relatively low-cost approach to reminder calls, may not only improve <u>diabetic retinopathy</u> screening rates in low-income minority <u>patients</u> with diabetes but also appears to correct the disparity in retinal screening observed among African Americans in this community," Ipp said.

He said it is unclear why robocalls improved the <u>retinal screening</u> rate better than usual care. The automated technique also has the advantage of being less expensive than staff time for calls.



The study received funding from the California Community Foundation in Los Angeles, Calif., and the Genentech Foundation in South San Francisco, Calif.

Provided by The Endocrine Society

Citation: Robocalls improve diabetes eye screening among low-income minorities (2018, March 19) retrieved 27 April 2024 from <u>https://medicalxpress.com/news/2018-03-robocalls-diabetes-eye-screening-low-income.html</u>

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