

Research changes GP guidelines on frailty in diabetes

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New guidelines will help GPs get the best outcomes for older people with diabetes after they were changed to include specific advice around frailty.

The newly revised GP contract, a five-year framework for GPs, includes the first specific guidance around how and when to stop treatment diabetes in particularly frail [older people](#). The new guidance is informed by research led by Dr. David Strain at the University of Exeter Medical School. It aims to optimise their quality of life and reduce their risk of harm.

The previous version of the GP contract incentivised achieving tight control of sugars for all people with type 2 diabetes, regardless of their age or health. However, as people age, some may become more sensitive to blood sugar-lowering drugs, meaning that their blood glucose levels can easily drop too low. Research has shown that this can increase their risk of dangerous episodes of hypoglycaemia and falls, which in turn means a higher risk of fractures and hospitalisation. Now, GPs will be required to assess for frailty and, when they identify it, they will be encouraged to use their own clinical judgment to stop the medications that may be doing harm.

Dr. David Strain, of the University of Exeter medical School, who led the underpinning research, said: "I'm delighted that this new guidance puts the needs of frail patients with diabetes at the centre of GP decision-making about their care. We know that a single episode of hospitalisation reduces quality of life in older people by around 30 per cent, and increases the cost of care by 56 per cent. It's crucial to get this right to help our older people live as well as possible with diabetes."

"This change marks a shift in the emphasis for older people living with type 2 diabetes, that GPs will no longer be incentivised to treat all people the same irrespective of their circumstances. It comes as a result of significant collaboration between general practitioners, consultants working in health services for older adults, NHS England and people living with diabetes."

Dr. Partha Kar, NHS England's Associate National Director for [diabetes](#) and Consultant Endocrinologist at Portsmouth Hospitals NHS Trust, said: "This outcome is the culmination of months of close working of the NHS England Diabetes team with the BMA GP group and we are delighted that an important issue of frailty is being looked into—with focus on individualised care—rather than a non-evidence based target driven culture. We hope this will help with issues of safety and avoid pitfalls of over treatment."

The changes are outlined in [The Investment and Evolution: A five-year framework for GP contract reform to implement the NHS Long Term Plan](#).

Provided by University of Exeter

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