

# Poor diabetes control costs the NHS in England 3 billion a year in potentially avoidable hospital treatment

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Poor diabetes control was responsible for £3 billion in potentially avoidable hospital treatment in England in the operational year

2017-2018, according to new research comparing the costs of hospital care for 58 million people with and without diabetes.

The findings, being presented at this year's European Association for the Study of Diabetes (EASD) Annual Meeting in Barcelona, Spain (16-20 September), reveal that on average, people with type 1 diabetes require 6 times more [hospital](#) treatment (£3,035 per person per year), and those with type 2 diabetes twice as much care (£1,291; after adjusting for their older age), than people without diabetes (£510).

Other than age, diabetes is the largest contributor to healthcare cost and reduced life expectancy in Europe. In England, two-thirds of people with type one diabetes and a third of those with type 2 diabetes have poor control over the blood sugar levels, increasing the risk of multiple long-term health problems ranging from kidney disease to blindness, and the need for additional hospital care.

In this study, researchers used data from the NHS Digital Hospital Episode Statistics in England and the National Diabetes Audit (2017-2018) to compare the cost of [hospital treatment](#) provided to people with type 1 and type 2 diabetes to people without diabetes, after adjusting for the effect of age.

Data on elective (planned) and [emergency admissions](#), outpatient visits, and accident and [emergency department](#) (A & E) attendances for 58 million people including 2.9 million with type 2 diabetes, and 243,000 with type 1 diabetes between 2017 and 2018 were analysed. This included 90% of all hospital care provided across England.

Of total hospital [costs](#) of £36 billion in 2017-2018, the NHS in England spent around £5.5 billion on hospital care for people with diabetes. Of that sum, an estimated £3 billion (8%) was excess expenditure on diabetes (after accounting for age)—almost 10% of the NHS hospital

budget.

Compared to people without diabetes, the average annual cost of elective care was more than two times higher for people with type 2 diabetes (£759 vs £331), and the average cost of emergency care was three times higher (£532 vs £179), having allowed for their age difference.

Similarly, average costs for people with type 1 diabetes were five-fold greater for elective care (£1,657 vs £331) and eight-fold higher for emergency care (£1,378 vs £179).

"People with diabetes are admitted to hospital more often, especially as emergencies, and stay on average longer as inpatients. These increased hospital costs, 40% of which come from non-elective and emergency care, are three times higher than the current costs of diabetes medication. Improved management of diabetes by GPs and diabetes specialist care teams could improve the health of people with diabetes and substantially reduce the level of [hospital care](#) and costs", says author Dr. Adrian Heald from Salford Royal Hospital in the UK.

The authors note that the study did not include the indirect costs associated with [diabetes](#), such as those related to increased death and illness, work loss, and the need for informal care.

Provided by Diabetologia

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