

'Repeat after me' for better diabetes care

November 30 2020, by Cara Murez



(HealthDay)—Repeat this: The key to helping people with diabetes stay healthier and out of the hospital could be as simple as better communication.

And an underutilized technique called "teach-back" may make a big difference for type 1 and type 2 [diabetes patients](#), a new study finds.

It's a simple concept: After a [health care provider](#) explains various details on treatment plans, medications and how to manage the disease at home, they then ask the patient to repeat back the information.

In the study, the technique "was associated with their better [patient] knowledge and also their better self-advocacy and their self-management," said Young-Rock Hong, the study's lead investigator. Hong is an assistant professor at the University of Florida College of Public Health and Health Professions.

Doctors already learn the technique in [medical school](#), noted Dr. Scott Isaacs, spokesman for the American Association of Clinical Endocrinology and medical director for Atlanta Endocrine Associates.

"It turns out that when you tell a patient something, they only hear about 10% of what you're telling them. And so, by using this technique it allows you to assess their understanding and their recall," said Isaacs, who wasn't part of the study.

The reason for the lack of initial understanding could include that it's new information to the patient and can be overwhelming to take in, Isaacs said.

The study analyzed data on more than 2,900 adults with diabetes. At the one-year follow-up, patients whose [care providers](#) used teach-back with them were 20% less likely to have diabetes-related [health](#) complications, including heart disease and kidney or eye problems. They were also less likely to be hospitalized with diabetes-related complications. Data came from the 2011-2016 Medical Expenditure Panel Survey administered by the U.S. Agency for Healthcare Research and Quality.

Besides improving diabetes care, this technique could save billions of dollars annually in U.S. health care expenditures, researchers said, with savings of \$1,400 to \$1,700 for each diabetes patient.

But only one-quarter of patients had consistent teach-back experiences with their doctors, the study found.

So why don't more doctors use this approach?

Researchers suggested doctors may not feel they have enough time for teach-back during the visits, or they may be skeptical about its effectiveness. They may also feel they're talking down to or quizzing their patients.

Hong previously studied teach-back with patients who had [high blood pressure](#), type 2 diabetes and [heart disease](#), finding patients engaged in teach-back were significantly less likely to require hospitalizations related to those conditions.

"Based on our previous findings, those who have the teach-back method of communication, they have better patient satisfaction, which means they may have better interactions, better relationships with their providers," Hong said.

"They may have some better adherence to their medications and also other self-management skills related to their conditions," he added.

Diabetes affects more than 34 million Americans. Another 88 million have prediabetes. The disease requires active self-management and continuous care by health care providers in order to prevent health complications, the research team noted.

Isaacs said the goal of treating diabetes is to prevent or delay the

complications of [diabetes](#) and improve quality of life. "This is really important for patients to have that knowledge of the disease and also to be able to comply with treatments," he explained.

"If they don't understand why they're being treated or how to follow whatever the treatments are, it's fighting a losing battle, but little things sometimes make a big difference," Isaacs added.

The study appears in the November/December issue of the *Journal of the American Board of Family Medicine*.

More information: The U.S. Agency for Healthcare Research and Quality offers more information on [teach-back communication](#).

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