Unstable housing tied to more diabetes-related ER visits
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Unstable housing is associated with an increased likelihood of diabetes-related emergency department visits and hospitalization, according to a study published online Jan. 4 in Diabetes Care.

Seth A. Berkowitz, M.D., from Massachusetts General Hospital in Boston, and colleagues used data from the nationally representative 2014 Health Center Patient Survey to examine whether unstable housing—defined as not having enough money to pay rent or mortgage, moving two or more times in the past 12 months, or staying at a place one does not own or rent—was associated with risk for diabetes-related emergency department visit or inpatient hospitalization. Overall, 37 percent of the 1,087 participants, representing 3,277,165 adults with diabetes, were unstably housed.

The researchers found that 13.7 percent of participants reported a diabetes-related emergency department visit or hospitalization in the previous 12 months. Unstable housing was correlated with increased odds of diabetes-related emergency department use or hospitalization after adjustment for multiple potential confounders (adjusted odds ratio, 5.17). Help with housing was provided through a clinic to only 0.9 percent of those with unstable housing.

"Unstable housing is common and associated with increased risk of diabetes-related emergency department and inpatient use," the authors write. "Addressing unstable housing in clinical settings may help improve health care utilization for vulnerable individuals with diabetes."

One author disclosed financial ties to UpToDate for writing a topic review relating to providing health care to homeless people.

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