



## **Nurse-led Diabetes Care Cuts Complications, Costs**

**Putting a nurse in charge of care for people with diabetes sharply reduces their need for urgent and emergency care, and reduces costs, a new study shows.**

Dr. Mayer B. Davidson of Charles R. Drew University in Los Angeles, tells us that, "The results convincingly demonstrate lower resource use among diabetic patients under nurse-directed care."

While the American Diabetes Association (ADA) has issued guidelines scientifically proven to improve diabetes patients' health, approaches like reminding patients about appointments and physician education have had little effect in improving outcomes, Davidson and his team note.

The researchers developed a program in which a registered nurse with special training provided care to patients with diabetes for one year based on detailed treatment guidelines. Most patients met goals for cholesterol lowering and long-term blood sugar control after the first year of the program.

Specifically, at the beginning of the nurse-directed program, 28 percent of patients met ADA guidelines for long-term blood sugar control and 37 percent met cholesterol control guidelines, compared to 64 percent and 80 percent, respectively, after one year of the program.

Among 331 patients with records available, there were 94 emergency room or urgent visits in the year before the program, compared to 46 for the year after the program was instituted.

Charges for diabetes-related urgent or emergency care were \$129,176 for the year before the program, compared to \$24,630 for the year after the program was instituted.

The program was likely so successful, Davidson and colleagues note, in part because patients learned self-management skills by working with the nurse.

"Policy makers seeking to improve diabetes care and conserve resources should seriously consider adopting this approach," they conclude.

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