Diabetes Management Within Budgets Work

A disease management program for patients with diabetes mellitus is associated with improved quality of care within existing budgets.

To assess the impact of a disease management program for patients with Type 1 and Type 2 diabetes on cost-effectiveness, quality of life and patient self-management. A study was done by organizing care in accordance with the principles of disease management, and it aimed to increase quality of care within existing budgets.

The study was from a single-group, pre-post design with 2-year follow-up in 473 patients. And the results showed substantial significant improvements in glycemic control, health-related quality of life (HRQL) and patient self-management were found. No significant changes were detected in total costs of care. The probability that the disease management program is cost-effective compared with usual care amounts to 74%, expressed in an average saving of 117 per additional life year at 5% improved HRQL.

From the results it was concluded that the introduction of a disease management program for patients with diabetes is associated with improved intermediate outcomes within existing budgets. Further research should focus on long-term cost-effectiveness, including diabetic complications and mortality, in a controlled setting or by using decision-analytic modelling techniques.

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