Diabetes Distress Screening Among Type 2 DM Patients in Primary Care

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CLINICAL PROBLEM

A lack of Diabetes Distress Screening Protocol (DDSP) at the project site.

DD is prevalent among DM Type 2 patient population and remains underrecognized and undertreated in clinical practice.

Will implementing the DDSP in a primary care clinic, improve screening rates for DD and referral for further management among adult patients diagnosed with DM Type 2 within the four-week timeframe?

Objectives:

1. Develop a diabetes distress screening protocol utilizing the validated instrument DDS
2. Educate participants in the DDSP and practice change
3. Improve participants' knowledge regarding DD
4. Evaluate providers' compliance with the DDSP

INTRODUCTION

DM is a complex disease process that may have psychosocial implications for patients.

DD is an emotional response which resulted from having to live with the demands of DM diagnosis.

DD can negatively impact DM self-care management leading to uncontrolled DM.

DDS screening tool is a validated tool that can identify DD among DM Type 2 patients. Can be translated into different languages.

DD is managed through structured diabetic education; referral to diabetic educators.

The DDSP was developed to guide healthcare providers in practice and provide a structure to offer treatment or referrals to those identified as having DD.

SIGNIFICANCE TO NURSING PROFESSION

Early detection and management of DD is critical in improving self-care, medical outcomes and quality of life of DM patients.

Nurses have direct contact with patients and can help recognize DD in practice. They can also be trained in the management of DD through structured diabetic education.

Assessment of DD is essential in primary care settings where DM Type 2 patients are commonly seen.
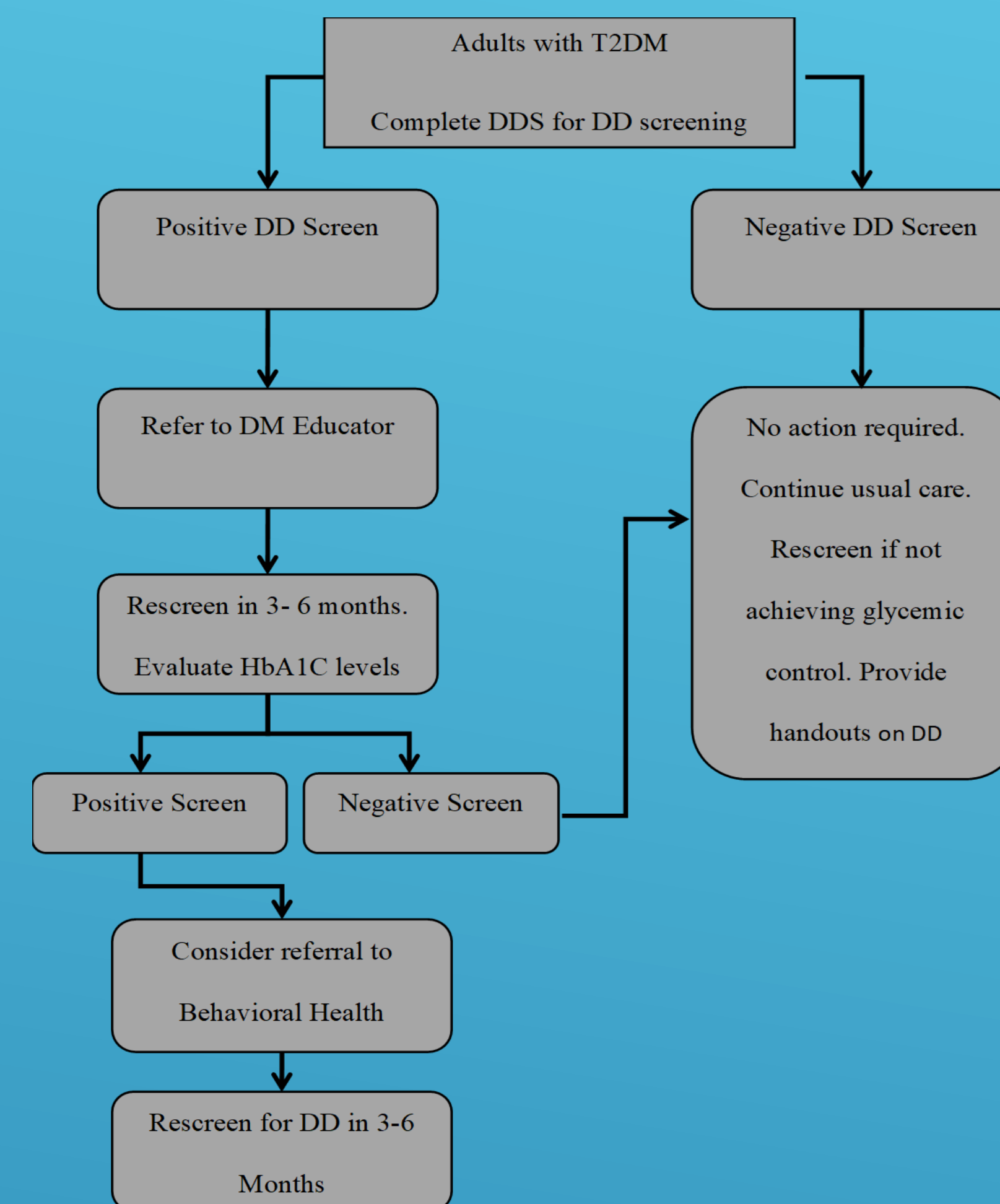
LITERATURE REVIEW

American Diabetes Association Guideline recommended screening for DD especially when target treatments are not met or developing early signs of complications.

DD and depression are common among diabetes patients; however, DD, not depression was independently linked to higher HbA1C levels.

DD and HbA1C have a bidirectional relationship. High DD levels can negatively impact self-care behaviors of some patients which can lead to elevated HbA1C levels while in other patients, poor glycemic control can lead to DD.

Risk factors for DD included younger population, female gender, duration of DM, insulin therapy, concurrent depression, presence of DM complications.

DIABETES DISTRESS SCREENING PROTOCOL FLOWCHART

Adults with T2DM Complete DDS for DD screening

Positive DD Screen — Negative DD Screen

Refer to DM Educator

No action required. Continue usual care. Rescreen if not achieving glycemic control. Provide handouts on DD

Rescreen in 3- 6 months. Evaluate HbA1C levels

Positive Screen — Negative Screen

Consider referral to Behavioral Health

Rescreen for DD in 3-6 Months

Direct Population included two medical providers, and four clinic support staff
Indirect population included adult patients with DM type 2 diagnosis
A chart audit tool was developed to evaluate compliance to the DDSP.

RESULTS

Participants' Scores
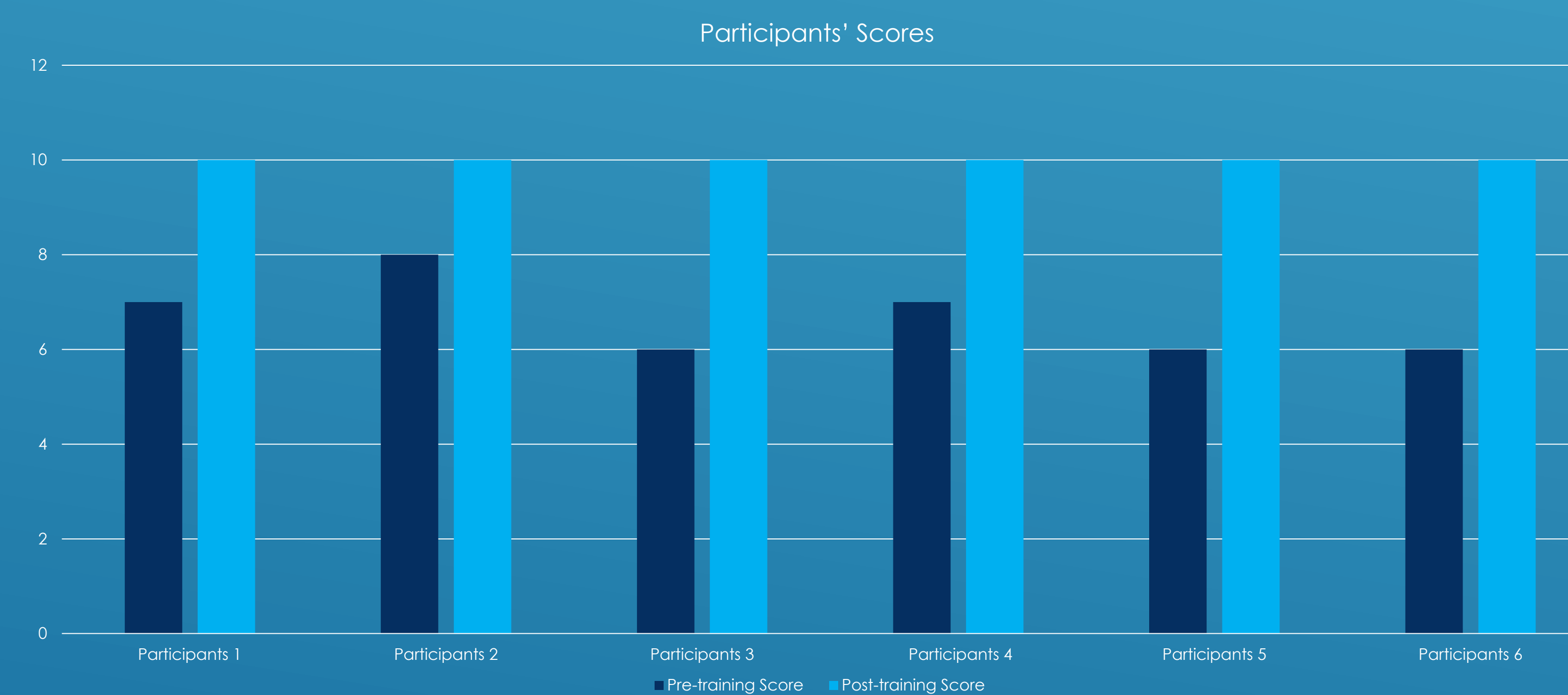
Participants' comparison of scores at Time One and Time Two
Improvement of knowledge after intervention
A hundred percent compliance to the protocol.

	Profile Variables	Frequency	Percentage
DDS Performed During	YES	82	100.0
Clinic Visit	NO	0	0
DD ≥ 2.0	YES	18	22.0
	NO	64	78.0
Referral to DM Educator if score is ≥ 2.0	YES	18	22.0
	NO	64	78.0

Diabetes Distress

22%

78%

Yes No
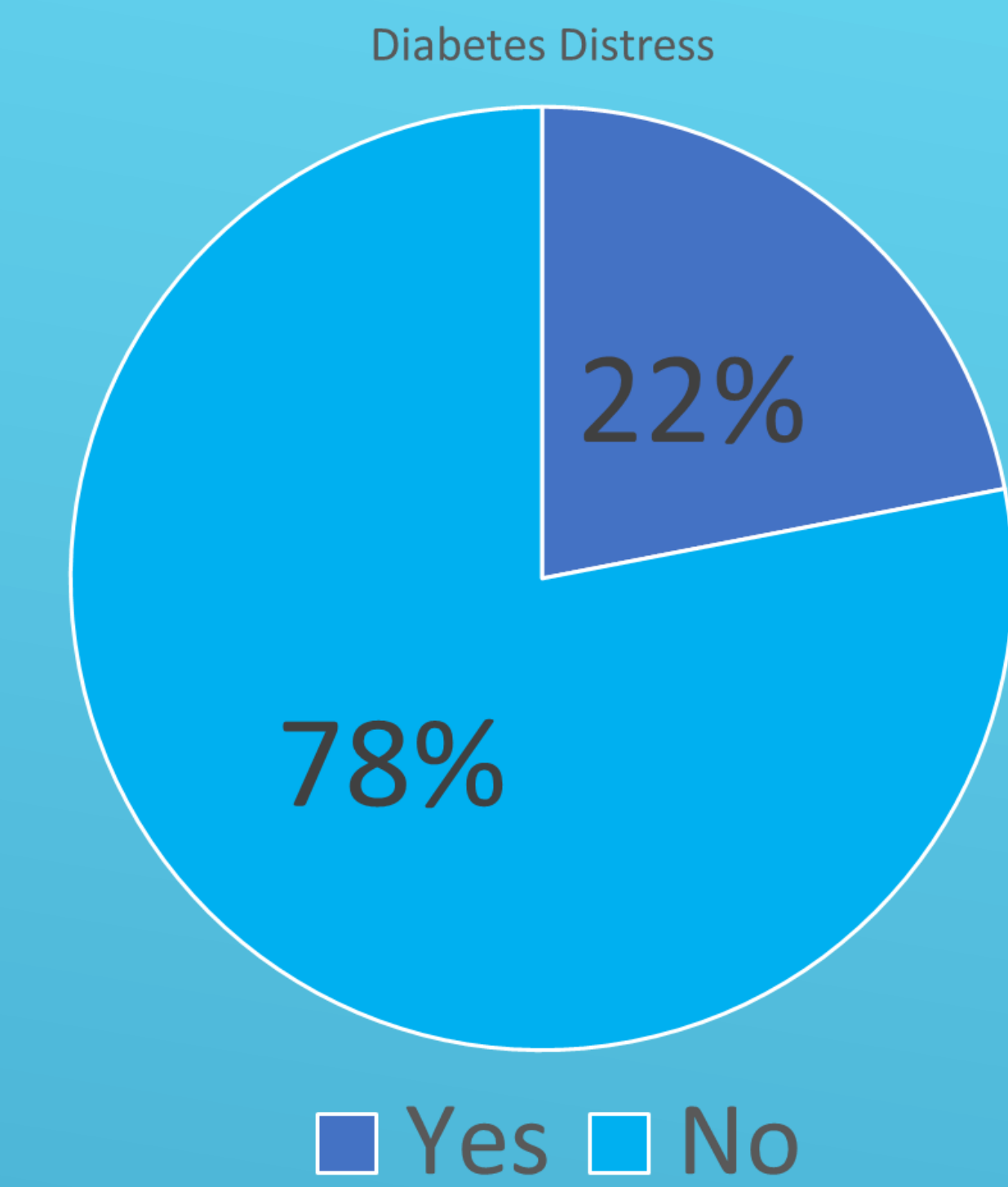
The DDSP screened 82 adults with DM type 2 and 18 patients were identified as having DD.

CONCLUSION

Screening and management of psychosocial issues is equally important to improve DM management in primary care. Because of the negative impact DD has on DM self-care, its early identification and management can improve patient outcomes and quality of life.

Education and training on DD screening is effective in improving participants' knowledge and compliance to the DDSP.

Implementing DSSP in practice is cost efficient and the DDS screening tool can be incorporated in the EMR.

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