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New book on an old foe

Researchers compile best-practice guidelines for managing diabetes in care settings. By Trisha Dunning, Nicole Duggan and Sally Savage

Planning care for older people with diabetes is challenging because complex medicine regimens are usually necessary; most people have multiple diabetes complications and at least one other comorbidity, which makes care more difficult, compromises diabetes self-care and leads to functional deficits and frailty.

These factors increase the risk of adverse events and admission to hospital or residential aged-care facility. They reduce quality of life and independence. Meanwhile, the Australian population is ageing and diabetes prevalence increases with age, making the issue of caring for these patients more prominent.

Research shows:

- There is an increased focus on community-based and culturally relevant care for older people – out of necessity. An estimated 1.8 million Australians will be aged 85 years and older by 2050, representing 5.1 per cent of the population; 3.5 million older people access aged-care services each year. The number of Australians living to 100 years increases by 8.5 per cent each year and Australia has one of the highest proportions of centenarians in the world.
 - The prevalence of diabetes and dementia are both increasing in Australia and the two conditions are linked. Both are associated with advanced age.
 - 16.8 per cent of older Australians have diabetes. A further 16.8 per cent have undiagnosed diabetes and many already have at least one complication when they are diagnosed.
 - 1 in 4 older Australians in residential aged-care facilities (RACF) has diabetes, a Diabetes Australia – Victoria spokesman says.
- This data suggests diabetes is a common health issue that has significant consequences for individuals with the disease,

their families and health services. Even so, optimal, individualised education and care based on a thorough assessment can reduce the number of adverse events and improve quality of life and other outcomes.

Defining optimal care for older people with diabetes is challenging, however, because they are usually excluded from the randomised control trials that generate Level 1 evidence, especially if they have complications and are using medicines.

Some existing diabetes guidelines have a section concerning older people, but few are holistic or comprehensive and often they do not address key care issues such as falls, pain, sexual health and wellbeing, dementia or end-of-life care.

THE MCKELLAR GUIDELINES

A new publication based on the best available evidence aims to address this. *The McKellar Guidelines for Managing Older People with Diabetes in Residential and Other Care Settings* was launched late last year by Craig Bennett, CEO of Diabetes Australia – Victoria.

The guidelines describe important issues that health professionals need to consider when planning care for and with individual older people with diabetes in RACFs, in the community or in hospital.

The publication was designed to help develop care plans to suit the individual's health status, self-care ability and social situation; it is also meant to encompass general and diabetes-specific care. The guide advocates regular proactive risk assessment, individualised metabolic targets and quality use of medicines – including comprehensive medicine reviews. It also calls for the use of non-medicine options when applicable and deprescribing whenever possible.

The National Health and Medical Research Council guideline development process was followed for the publication. Key stakeholders, including older people with diabetes, were consulted regularly. The final publication consists of 18 individual guidelines and five risk-assessment tools.

The material was evaluated in one large regional residential care facility in Victoria and four small rural ones. Results showed the guidelines helped aged-care staff:

- learn more about how to assess and plan care for older people with diabetes
- make decisions about individual older people's care needs
- discuss important information about older people's health and wellbeing with their GPs
- proactively identify risks such as falls, pain, medicine side effects, hypoglycaemia and hyperglycaemia, and gain information on how to plan care to reduce the risks.

The McKellar Guidelines will have an important role in the care of older people with diabetes in the future. They set the standard for evidence-based diabetes care and can be used to audit and improve existing practice. ■

For the guidelines, go to: adma.org.au/clearinghouse/cat_view/4-guidelines.html

Trisha Dunning, Nicole Duggan and Sally Savage are the authors of *The McKellar Guidelines*.



Trisha Dunning



Nicole Duggan



Sally Savage