

TITLE	Diabetes prevention
FOR CONSIDERATION BY	Health Overview and Scrutiny Committee on Monday, 19 November 2018
WARD	None Specific;
KEY OFFICER	Julie Hotchkiss, Interim Consultant in Public Health

OUTCOME / BENEFITS TO THE COMMUNITY

Any actions which result in reducing obesity and preventing diabetes will improve the health of those residents, and reduce health and social care costs associated with diabetes.

RECOMMENDATION

That Members note the report.

SUMMARY OF REPORT

Diabetes is a growing problem which causes illness, suffering and early death, as well as placing huge demands on health services and eventually social care when complications have developed.

Catching people when their blood sugar is raised, but not high enough to be classified as diabetes, enables intervention which can arrest or reverse the development of diabetes in many cases.

A national programme, Healthier You, to provide these interventions to suitable people is in a process of rollout and Wokingham is now entering the third year of implementation.

There have been a number of teething problems with the roll out of Healthier You, but a new provider started recently and the situation is improving.

Background

The prevalence of diabetes continues to rise in Britain. The increase is in Type 2 diabetes which is the type which stereotypically we associate with middle-aged people who were overweight. However, not all people who develop Type 2 diabetes are overweight, and the growing number of young people who are very overweight means that we now have some children diagnosed with Type 2 diabetes.

Diabetes affects the circulatory system, and damage occurs to the blood vessels in the heart, brain, eyes, legs and kidneys, giving rise to complications including heart attacks, strokes, blindness, amputations and kidney failure. This is apart from the impact it has on mental health, its impact on the finances of the individual and impact on the family. About 22,000 people a year die earlier than they would have done if they didn't have diabetes.

One in six of all people in hospital have diabetes – while diabetes is often not the reason for admission, they often need a longer stay in hospital, are more likely to be re-admitted and their risk of dying is higher.

There are currently 3.4 million people with Type 2 diabetes in England with around 200,000 new diagnoses every year. While Type 1 diabetes cannot be prevented and is not linked to lifestyle, Type 2 diabetes is largely preventable through lifestyle changes.

As well as the human cost, Type 2 diabetes treatment accounts for just under nine per cent of the annual NHS budget. This is around £8.8 billion a year.

There are currently five million people in England at high risk of developing Type 2 diabetes. If current trends persist, one in three people will be obese by 2034 and one in 10 will develop Type 2 diabetes.

There is strong international evidence which demonstrates how behavioural interventions, which support people to maintain a healthy weight and be more active, can significantly reduce the risk of developing the condition.

The Healthier You: NHS Diabetes Prevention Programme (NDPP) identifies those at high risk and refers them onto a behaviour change programme. It is part of the national programme which by 2020 is expected to provide support to 100,000 individuals each year.

Those referred to the service receive tailored, personalised support to reduce their risk of Type 2 diabetes including education on healthy eating and lifestyle, help to lose weight and physical exercise programmes, all of which together have been proven to reduce the risk of developing the disease.

The programme consists of the following stages:

Stage 1: Initial one-to-one assessment with a Health & Wellbeing coach to assess health and take measurements, including height, weight, waist circumference and a finger jab blood sample if required

Stage 2: Joining a Healthy Foundations group, which consists of two elements; X-PERT Health nutrition sessions and physical activity drawing on healthy lifestyle advice

Stage 3: Moving on to the Prevention Plus group sessions which builds on the dietary knowledge gained during the Healthy Foundations sessions

Stage 4: Review at 6 and 9 months, with repeat measurements

Before a person can be referred, they must be found to have a persistently raised blood sugar. There is a blood test which measures a chemical which varies according to blood sugar levels in the previous 3 months, this chemical is known as HbA1c. Normally this blood test would only be carried out if there was a suspicion that the person might have diabetes. Over a certain level (48 mmol/mol) the person is diagnosed with diabetes. People whose HbA1c level lies within the band 42 to 47.9 are considered to be “at risk”. The terms pre-diabetes and Impaired Glucose Tolerance (IGT) were used previously and mean the same thing.

People known to be at risk of diabetes by their general practice are being identified by electronically searching the medical records, and these people are then sent a letter inviting them to ring Healthier You to arrange an initial assessment visit.

One of the limitations of the NDPP is that only people who have already had their blood tested for HbA1c will be invited to join the programme, so many people who would benefit from the programme are not being offered it.

The NHS Health Check programme assesses the cardiovascular risk of “healthy” people i.e. people not known to have a vascular disease (heart disease, stroke, diabetes and others) in the 40-74 year age group. When people attend a Health Check they are weighed and measured and asked various questions about their lifestyle. From the collected information a diabetes risk score is calculated, and if it is over a certain level the person should have or be referred for an HbA1c test. So the Health Check programme both finds people who have undiagnosed diabetes, but also those at risk of diabetes.

Currently in Wokingham a number of general practices are no longer providing NHS Health Checks, and the new leisure provider, Places Leisure will be offering Health Checks to eligible people once data transfer and clinical governance arrangements have been sorted out. Places Leisure will have analysers to test HbA1c of patients who score over the threshold on the diabetes risk assessment, so people can have the results there and then rather than having to make a separate trip to the GP.

Analysis of Issues

Latest results of the Healthier You roll out in Wokingham will be presented at the meeting.

Partner Implications
The impact of diabetes and obesity on health and social care is considerable, and if these two inter-related issues were reduced it would reduce demand on resources.
Reasons for considering the report in Part 2
N/A
List of Background Papers
Diabetes Prevention for HOSC 19 November 18

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