

# QUALITY INDICATORS OF DIABETES CARE IN PRACTICE

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**Abstract.** The objective of this study was to explore the practicability of using process and outcome indicators to routinely assess the quality of diabetes care. Health care data of diabetic patients using antidiabetic drugs older than 40 years old in 2006-2008 were retrieved from an electronic information system of Phramongkutklo Hospital, Thailand. The process and outcome indicators were taken from the standard of medical care in diabetes of the American Diabetes Association, 2006 - 2008 and other studies. A list of the practical indicators was selected according to the availability and completeness of the electronic data in the information system, consisting of glycemic control, lipid control, and antiplatelet therapy. For process indicators, the percentages of patients with a yearly measured HbA1c, LDL-cholesterol, triglyceride, HDL-cholesterol, and antiplatelet therapy were 56.5-67.2, 87.8-90.2, 76.6-81.4, 71.8-75.5, and 69.7-75.9%, respectively. For outcome indicators, the percentages of patients with most recent blood levels of HbA1c, LDL-cholesterol, triglyceride, and HDL-cholesterol at target levels were 25.1-32.5, 27.7-33.9, 50.1-54.7, and 53.1-62.5%, respectively. The practicability of these quality indicators in determining the quality of diabetes care will depend on the quality of the hospital electronic databases. Among these applicable indicators at this particular setting, the glycemic and lipid control, and antiplatelet therapy seemed to be sufficiently provided according to the standard diabetes care recommendation. However, the poor outcomes as measured by lipid profiles and HbA1c suggested that other intervention may also be necessitated to better these outcomes.

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