

## **Evaluation of Diabetes Care in a Primary Care Setting**

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**Objective:** To assess the level of control of diabetes among people seen in the diabetes clinic and in a general clinic.

**Design:** A retrospective clinical study.

**Setting:** Isa Town Health Center.

**Method:** The records of 996 patients with diabetes were randomly selected and reviewed for screening of macrovascular and microvascular complications. The following parameters were screened: lipids, blood pressure (BP), glycated haemoglobin (HbA1C), neurovascular foot assessment, smoking, referral for retinal examination, and urine screening for albuminuria and/or proteinuria in the period from 1.3.2006 till 15.6.2006.

**Result:** One hundred thirty-four patients (13.5%) had HbA1C less than 7; one hundred thirty-seven patients (13.7%) had BP less than 130/80; three hundred and fifteen patients (31.6%) were on statins; forty-two (13.5%) of the patients who were on statins achieved the Low Density Lipoprotein (LDL) target level; one hundred sixty-four (16.5%) patients who were above 40 years received aspirin; three hundred and eighteen patients (31.9%) were referred for retinal examination; urine screening was done for three hundred thirty-three patients (33.4%). A highly significant statistical difference between the general and diabetes clinic was found in screening for all macrovascular and microvascular complications; with the exception of HbA1C, there was also a highly significant difference in metabolic and BP control among patients seen in diabetes versus general clinic.

**Conclusion:** Neurovascular assessment of the feet was missing in the records reviewed in the general clinic. Referral for retinal screening is very low especially in patients seen in the general clinic. The level of metabolic and BP control is low in both the general and diabetes clinic.