

## DIABETES REGISTRIES

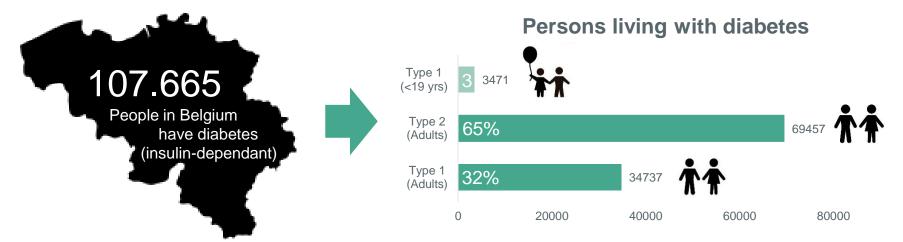
Improvement of the quality of care in specialized diabetes centers (IQED, IQED-Foot & IQECAD)

17 May 2024

Suchsia Chao (responsible IQECAD)
Astrid Lavens (responsible IQED)
An-Sofie Vanherwegen (team leader, responsible IQED-Foot)

### Diabetes in numbers

**Diabetes** is a chronic disease with a constantly increasing prevalence worldwide, characterized by chronic hyperglycemia which, over time, leads to serious damage to many organ systems, especially nerves and blood vessels.



### Those diagnosed are also at risk for



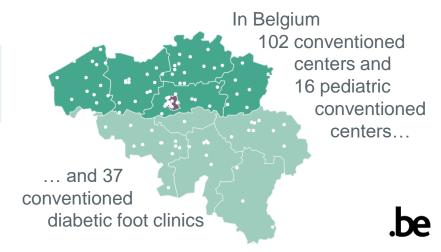








Blindness and eyes problems
Heart disease and/or stroke
Kidney disease
Neuropathy
Foot problem or amputation



## Project responsible

3 projects financed by RIZIV/INAMI aimed at measuring and improving quality of care in hospital-based multidisciplinary centres treating:



Initiative for Quality improvement and Epidemiology in Diabetes

Adult diabetic patients (≥2 injections/day) → IQED



Astrid Lavens



Initiative for Quality improvement and Epidemiology in multidisciplinary Diabetic Foot clinics

Adult patients with severe diabetic foot ulcers  $\rightarrow$  IQED-Foot



An-Sofie Vanherwegen



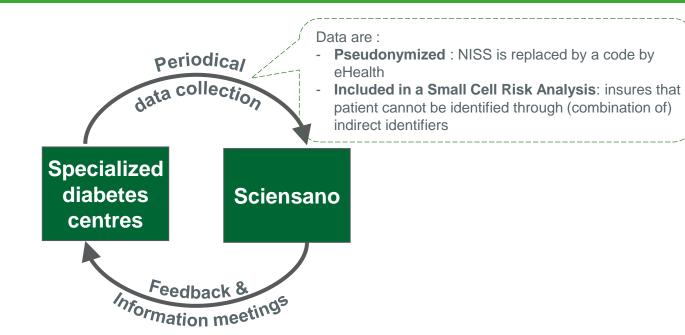
Initiative for Quality Improvement and Epidemiology in Children and Adolescents with Diabetes

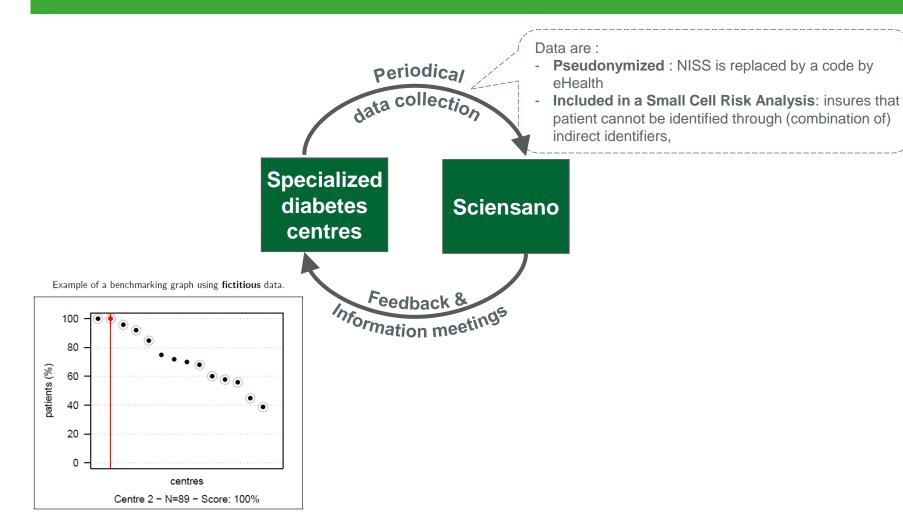
Paediatric diabetic patients → IQECAD

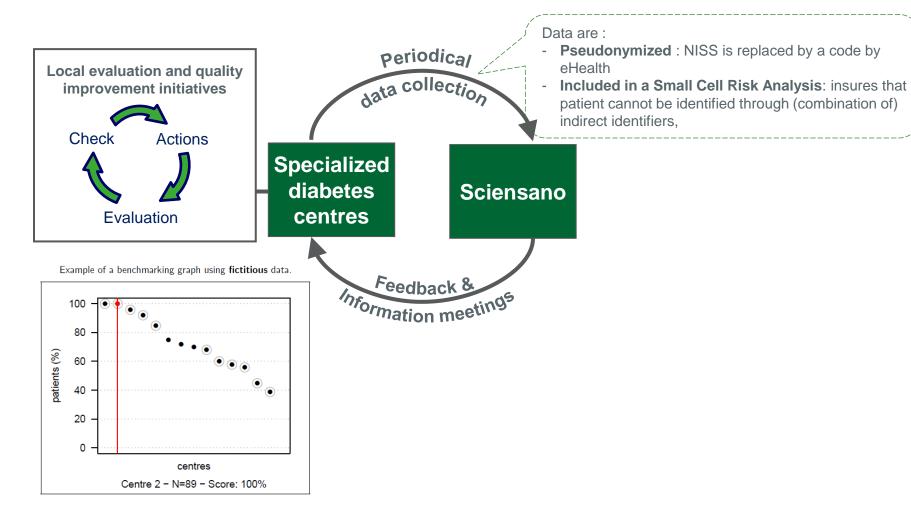


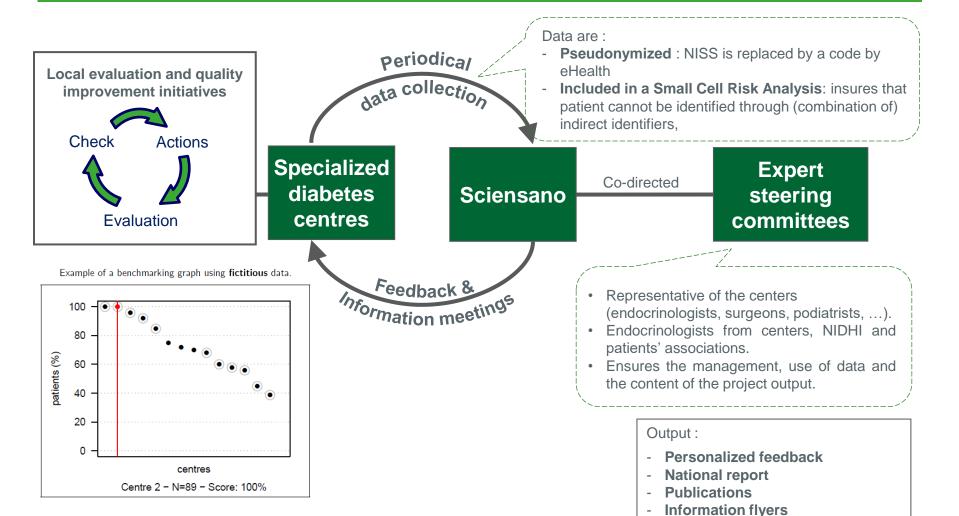
Suchsia Chao



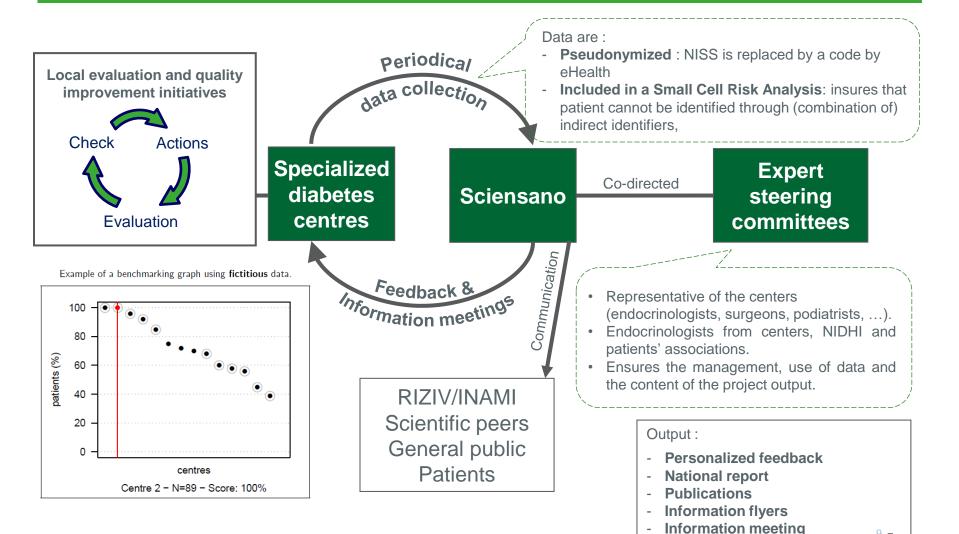








Information meeting







#### Data are:

- **Pseudonymized**: NISS is replaced by a code by eHealth
- Included in a Small Cell Risk Analysis: insures that patient cannot be identified through (combination of) indirect identifiers.

**Specialized** diabetes centres

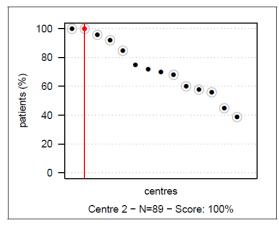
Sciensano

Communication

Co-directed

**Expert** steering committees

Example of a benchmarking graph using fictitious data.



Information meetings

Feedback 8

RIZIV/INAMI Scientific peers General public **Patients** 

- Representative of the centers (endocrinologists, surgeons, podiatrists, ...).
- Endocrinologists from centers, NIDHI and patients' associations.
- · Ensures the management, use of data and the content of the project output.

#### Output:

- Personalized feedback
- **National report**
- **Publications**
- **Information flyers**
- Information meeting
- **Publications**



Monitor and improve diabetes care



## Which data are collected?



IQED



IQED-foot



Patient ID (pseudonimized), sex, age, region, date of death, diabetes type, BMI, history of micro/macrovascular complications

Blood pressure, acute complications, HbA1c, insulin regimen, method of blood glucose measurement, medications and lipids measurement

Smoking status, transplants, foot ulcer, amputation, revascularisation treatment, foot specific examinations

Parents ethnicity, family structure, language barrier, psychosocial distress, puberty and comorbidities Kidney function,
waist circumference,
medications for
lowering blood glucose,
hyperlipidaemia,
hypertension and pain

Foot ulcer severity, localization, Charcot, treatment, healing, secondary prevention



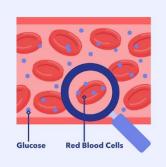
# IQECAD HIGHLIGHTS

Children and adolescents with diabetes



# IQECAD highlights 🦙

### Highlight #1: Improvement of the glycated hemoglobin in most of the centers

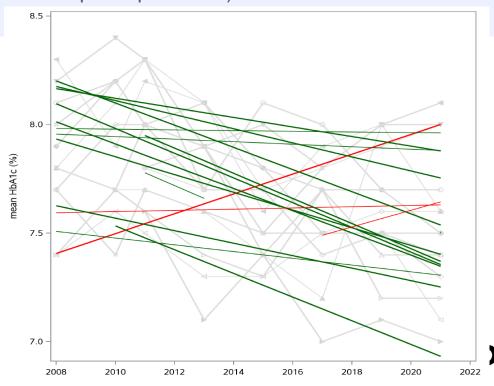


### Glycated hemoglobin (HbA1c)

- Measures the average blood glucose levels over 3 months
- → Key biomarker that assesses long-term glucose control
- It correlates with the development of complications (lower level
   less likely to develop complications).

#### Since 2008:

- An improvement in HbA1c was observed in 14 out of 17 centers.
- For 8 centers, this decrease was statistically significant (lines in **bold**)
- For 3 centers:
   HbA1c increased over time <u>BUT</u>
   had the lowest starting level.



# IQECAD highlights

### Highlight #2: Belgium has good position in international HbA1c comparison



RESEARCH: EPIDEMIOLOGY

#### International comparison of glycaemic control in people with type 1 diabetes: an update and extension

Regina Prigge, John A. McKnight, Sarah H. Wild X, Aveni Haynes, Timothy W. Jones, Elizabeth A. Davis, Birgit Rami-Merhar, Maria Fritsch, Christine Prchla, Astrid Lavens, Kris Doggen ... See all authors 🗸

First published: 10 December 2021 | https://doi.org/10.1111/dme.14766 | Citations: 13

J. A. McKnight and S. H. Wild are joint senior authors.

Read the full text >







#### **Abstract**

#### **Aims**

To update and extend a previous cross-sectional international comparison of glycaemic control in people with type 1 diabetes.

#### International comparison (Prigge et al):

- 54,158 children aged < 15 years with type 1 diabetes
- 19 countries or regions between 2016 and 2020
- Median HbA1c (IQR) is presented in order of increasing HbA1c.
- → Belgium has an excellent position in the ranking!



# IQECAD highlights



### Highlight #2: Belgium has good position in international HbA1c comparison

Country/Region	Data source	N	Median HbA1c % (IQR)	Missing HbA1c (%)	
Italy	regional	192	7.2 (6.8; 8.1)	0	
Greece	clinic	26	7.2 (6.8; 7.6)	3.8	
Belgium	national	2,242	7.3 (6.7; 7.9)	1	
Denmark	national	1,869	7.4 (6.7; 8.0)	15.5	
Austria	national	1,444	7.4 (6.8; 8.1)	0.6	
Netherlands	clinic	583	7.4 (6.9; 8.1)	2.2	
Germany	national	17,463	7.5 (6.8; 8.3)	1.3	
Slovenia	national	382	7.5 (7.0; 8.1)	0	
Australia	regional	627	7.6 (6.9; 8.2)	3.5	
England	national	18,514	7.7 (7.0; 8.3)	6.1	
Wales	national	1,045	7.7 (7.0; 8.4)	5.6	
Scotland	national	1,960	7.8 (7.3; 8.5)	2.2	
Finland	regional	131	7.8 (7.3; 8.4)	2.3	
France	regional	40	8.0 (7.5; 8.5)	0	
Hong Kong	national	228	8.1 (7.3; 9.0)	8.3	
Ukraine	national	6,618	8.3 (7.3; 9.7)	13.3	
New Zealand	regional	324	8.3 (7.4; 9.6)	8.8	
Ireland	clinic	74	8.4 (7.5; 9.2)	12.2	
Latvia	national	396	9.1 (7.8; 10.8)	12.1	

#### International comparison (Prigge et al):

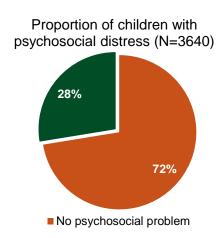
- 54,158 children aged < 15 years with type 1 diabetes
- 19 countries or regions between 2016 and 2020
- Median HbA1c (IQR) is presented in order of increasing HbA1c.
- → Belgium has an excellent position in the ranking!

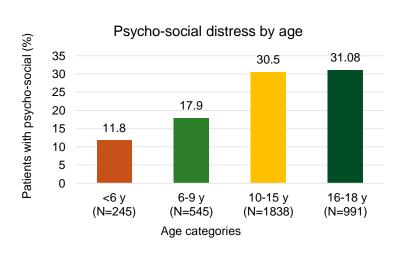


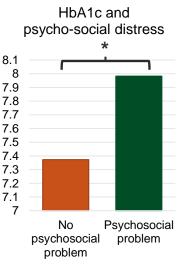
## IQECAD highlights

# <u>Highlight #3</u>: In a near future, use of Patient-Reported Outcome Measures (PROMs) to screen psychosocial distress

- Psychosocial distress = unpleasant emotions an individual has when they are overwhelmed.
- In diabetes: Psychosocial distress impacts the quality of life of children with diabetes, complicates the effective disease management, treatment adherence, which can lead to long term complications.







\* P-value < 0.05,



Development of a platform (online questionnaire) to assess psychosocial distress in children with diabetes



# IQED HIGHLIGHTS

Adults with diabetes (≥2 insulin injections/day)



# IQED highlights 💏

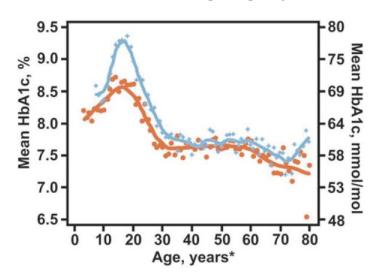
### Highlight #1: Decrease in HbA1c in all age categories in people with T1D

Diabetes Technol Ther. 2019 Feb;21(2):66-72. doi: 10.1089/dia.2018.0384. Epub 2019 Jan 18.

## State of Type 1 Diabetes Management and Outcomes from the T1D Exchange in 2016-2018

Nicole C Foster <sup>1</sup>, Roy W Beck <sup>1</sup>, Kellee M Miller <sup>1</sup>, Mark A Clements <sup>2</sup>, Michael R Rickels <sup>3</sup>, Linda A DiMeglio <sup>4</sup>, David M Maahs <sup>5</sup>, William V Tamborlane <sup>6</sup>, Richard Bergenstal <sup>7</sup>, Elizabeth Smith <sup>1</sup>, Beth A Olson <sup>7</sup>, Satish K Garq <sup>8</sup>

#### **US - T1D Exchange Registry**



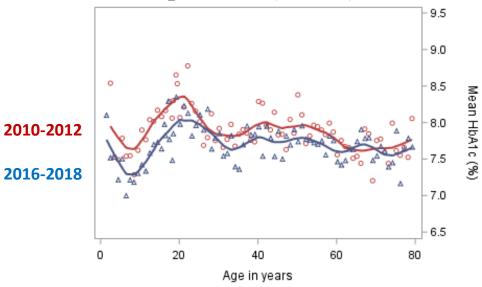
Overall mean HbA1c: + 0,6% (From 7.8% to 8.4%)

Observational Study > Diabetes Technol Ther. 2021 Aug;23(8):565-576. doi: 10.1089/dia.2021.0003. Epub 2021 Apr 27.

#### Effect of an Integrated, Multidisciplinary Nationwide Approach to Type 1 Diabetes Care on Metabolic Outcomes: An Observational Real-World Study

Astrid Lavens <sup>1</sup>, Frank Nobels <sup>2</sup>, Christophe De Block <sup>3</sup>, Philippe Oriot <sup>4</sup>, Ann Verhaegen <sup>3</sup>, Suchsia Chao <sup>1</sup>, Kristina Casteels <sup>5</sup> <sup>6</sup>, Thierry Mouraux <sup>7</sup>, Kris Doggen <sup>1</sup>, Chantal Mathieu <sup>8</sup>; Belgian Group of Experts IQED and IQECAD

#### Belgium - T1D IQED and IQECAD



Overall mean HbA1c: - 0,33% (from 8.1% to 7.7%)



# IQED highlights 🌴

### Highlight #2: Top 3 position glycemic control in people with T1D

Prigge, ..., Lavens, et al. Diab Med 2021

**15-24 years** 

						Missing	Diabetes	
	Data		Male	Median HbA <sub>1c</sub>	$HbA_{1c}$ %	HbA <sub>1c</sub>	duration	CSII u
15-24 years								
England	National	43,115	53.5	72 (60; 88)	8.7 (7.6; 10.2)	18.7	69.1	11.2
Germany	National	10,823	54.1	62 (53; 74)	7.8 (7.0; 8.9)	1.8	-	42.4
Wales	National	5995	53.4	73 (61; 88)	8.8 (7.7; 10.2)	20.6	69.1	11.2
Sweden <sup>b</sup>	National	5175	55.9	58 (50; 70)	7.5 (6.7; 8.6)	2.4	82.1	40.6
Belgium	National	4692	53.3	60 (52; 69)	7.6 (6.9; 8.5)	2.2	71.5	12.8
Scotland	National	4237	52.1	71 (60; 86)	8.6 (7.6; 10.0)	9.0	77.0	24.0
Ukraine <sup>c</sup>	National	2665	52.5	72 (61; 88)	8.7 (7.7; 10.2)	10.0	62.8	1.0
Norway <sup>b</sup>	National	1632	56.1	66 (55; 77)	8.2 (7.2; 9.2)	2.1	78.8	52.9
Latvia	National	529	54.6	79 (64; 99)	9.4 (8.0; 11.2)	21.9	74.5	-
Hong Kong	National	410	46.1	64 (54; 77)	8.0 (7.0; 9.2)	16.3	70.7	-
Slovenia	National	355	54.9	61 (53; 70)	7.7 (7.0; 8.6)	0.8	76.9	74.6
Australia <sup>d</sup>	Regional	484	50.2	64 (55; 78)	8.0 (7.2; 9.3)	1.9	73.6	48.1
Italy	Regional	324	50.6	60 (53; 69)	7.6 (7.0; 8.5)	1.2	76.5	26.5
Finland	Regional	177	53.1	68 (59; 76)	8.3 (7.5; 9.1)	4.5	-	-
New Zealand	Regional	155	57.4	72 (58; 88)	8.7 (7.5; 10.1)	6.6	69.0	23.2
Netherlands	Clinic	1392	46.8	63 (55; 75)	7.9 (7.2; 9.0)	2.9	83.1	60.6
Canada	Clinic	419	51.1	67 (56; 79)	8.3 (7.2; 9.3)	17.7	83.9	41.3
Ireland	Clinic	222	49.5	71 (62; 80)	8.6 (7.8; 9.5)	24.3	76.9	17.6
France	Clinic	142	47.2	64 (53; 75)	8.0 (7.0; 9.0)	0.0	83.1	33.1
Greece	Clinic	122	53.3	56 (50; 66)	7.3 (6.7; 8.2)	5.7	76.2	21.3



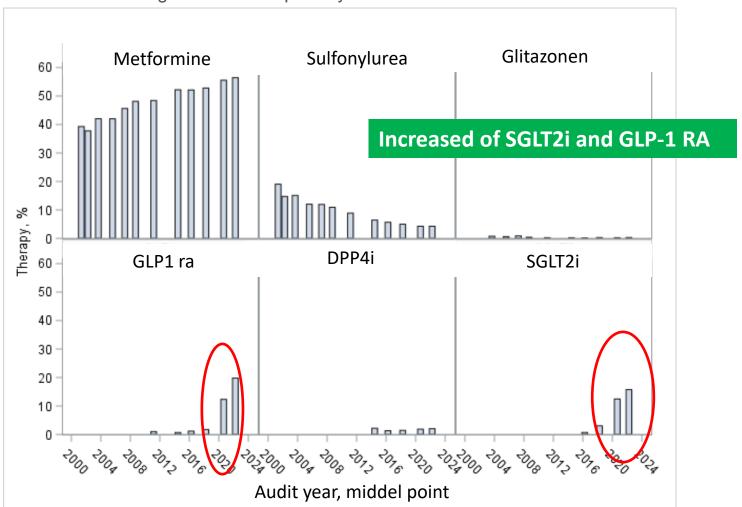
### ≥25 years

Country or region	Data source	N	Male (%) <sup>a</sup>	Median HbA <sub>1c</sub> mmol/mol (IQR)	HbA <sub>1c</sub> % (IQR)	Missing HbA <sub>1c</sub> (%) <sup>a</sup>	Diabetes duration ≥5 years (%) <sup>a</sup>	CSII use
≥ 25 years								
England	National	221,545	56.3	66 (57; 78)	8.2 (7.4; 9.3)	10.2	85.7	8.1
Sweden	National	43,510	55.7	58 (51; 67)	7.5 (6.8; 8.3)	1.5	93.4	22.6
Belgium	National	30,398	55.0	58 (52; 67)	7.5 (6.9; 8.3)	2.3	90.5	12.1
Wales	National	27,160	53.8	68 (58; 80)	8.4 (7.5; 9.5)	13.8	84.3	10.2
Scotland	National	25,844	56.7	67 (58; 79)	8.3 (7.5; 9.4)	12.2	93.0	11.5
Norway	National	12,136	55.1	61 (52; 70)	7.7 (7.0; 8.5)	2.4	90.5	30.9
Germany	National	8644	51.9	58 (50; 68)	7.4 (6.7; 8.4)	7.2	_	12.4
Latvia	National	1958	53.6	67 (57; 80)	8.3 (7.4; 9.5)	31.7	94.8	-
Hong Kong	National	1597	49.1	60 (51; 72)	7.6 (6.8; 8.7)	21.1	76.3	-
Italy	Regional	2468	55.5	61 (53; 69)	7.7 (7.0; 8.5)	1.1	90.5	18.5
Finland	Regional	1130	58.5	64 (56; 74)	8.1 (7.3; 8.9)	7.5	_	-
Canada	Clinic	3454	54.5	62 (54; 70)	7.8 (7.0; 8.6)	8.7	90.7	36.2
Ireland	Clinic	1341	53.5	66 (56; 76)	8.2 (7.3; 9.1)	45.4	91.2	11.4
Netherlands	Clinic	720	49.4	56 (50; 65)	7.3 (6.7; 8.1)	5.8	93.2	60.8
France	Clinic	644	51.1	64 (53; 75)	8.0 (7.0; 9.0)	0.0	91.2	59.9
Greece	Clinic	358	45.0	58 (52; 68)	7.5 (6.9; 8.4)	2.0	89.5	19.3

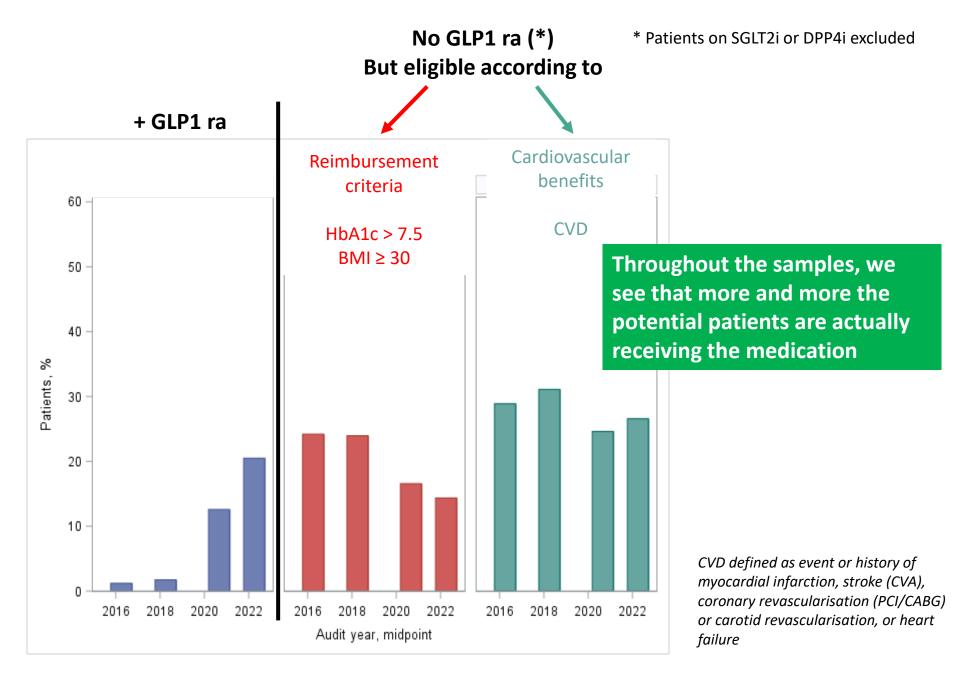
# IQED highlights 🔭

### **Highlight #3**: Adjunct therapy in people with T2D

= Another treatment used together with the primary treatment.





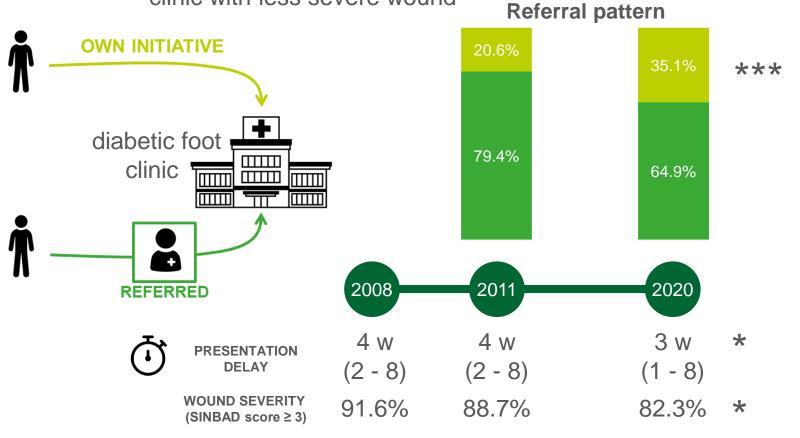


## IQED-FOOT HIGHLIGHTS

Adults with severe diabetic foot ulcers (Wagner ≥ 2) or active Charcot



Highlight #1: People present sooner and more on their own initiative to the foot clinic with less severe wound



- → Visibility of the DFC improved.
- → Patients experience less barriers to contact the DFC directly.



<u>Highlight #2:</u> The foot clinics use the individual feedback reports

### Impact survey after audit 5



20/35 DFC (57%)



75% internal evaluation (15/20) 93% used individual feedback (14/15)



93% took at least 1 quality improvement initiative (14/15)





<u>Highlight #2:</u> The foot clinics use the individual feedback reports

Impact survey after audit 5



Continuous improvement individual feedback report



20 (57%)



Evolutie van eender welke drukontlasting

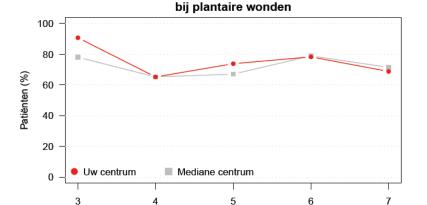


75% internal evaluation 93% used individual feedback



93% took at least 1 quality improvement initiative





Audit 8: new indicators ~ international guidelines

Audit

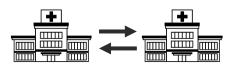


Highlight #3: Several (additional) initiatives for quality improvement



### Information meeting with workshops

- 2-yearly
- Presented by GE members
- Topics ~ feedback foot clinics and GE, hot topics



#### Peer visits

- Individual or group
- Exchange on best practices and practical organisation
- Reduce variation between foot clinics.



#### **Portfolio**

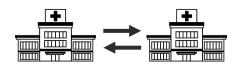


### Online symposium "Mind the gap"

- 3 focus talks
- Presented by GE members
- Active and open discussion on gaps and barriers for quality improvement



Highlight #3: Several (additional) initiatives for quality improvement



#### Peer visits

Aim? Exchange on best practices & reduce variation between foot clinics

#### Launched in 2023

- Overview of foot clinics open to visitors
- 2 group visits in OLV Aalst

1<sup>st</sup> evaluation in 2024

28 responses

- 11 participated to group visit
- 0 individual visits
- 2 received visitors

**79%** 

Appreciated the concept

91%

Networking, exchanging experiences

63%

Recommends to colleagues

Action in own foot clinic after visit

► Stimulate individual visits

No time





### Contact

Diabetes in children and adolescents (IQECAD) • iqecad@sciensano.be •

Diabetes in adults (IQED) • iqed@sciensano.be •

Diabetics foot (IQED-foot) • iqedfoot @sciensano.be •