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Title: Peritoneal Dialysis Patients and Hemoglobin A1c Testing, 1995-2000

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Abstract:

Control of HbA1c levels to less than 7.5% has been shown to reduce small vessel complications of DM in the general population. These data from prospective clinical trials have led to glycemic control monitoring of diabetics as standard practice and have become part of clinical practice guidelines from the American Diabetes Association (ADA) for a number of years. Little information is available of glycemic control monitoring in the PD population. Since the ADA guidelines suggest all diabetics have an HbA1c test at least twice annually, we examined this practice among diabetic peritoneal dialysis (PD) patients. We studied (N=20,014) patients age 18-75 for the years 1995 to 2000 to determine the percentage of patients who received HbA1c tests on this home-based therapy.

Patients who were on PD, survived an entire year, and had Medicare as the primary payer for the entire calendar year defined the yearly cohorts. Among those eligible for a given year, claims were searched to see if HbA1c tests were billed to Medicare. A percentage was then calculated among eligible PD patients. The table at the bottom summarizes the results.

These data suggest that providers have been improving the monitoring of glycemic control in PD patients. The frequency of this monitoring has yet to be determined since two tests annually may not reflect the frequency with which these diabetics are exposed to alterations in dialysate glucose solutions which impact glycemic control. Further studies are needed to determine if improved glycemic control monitoring in diabetes mellitus PD patients is associated with improved outcomes and reduced complications.

Percent of Eligible Patients Receiving HbA1c Tests				
Year	N	1+ Test	2+ Tests	3+ Tests
1995	3356	44.5%	35.1%	27.8%
1996	3535	52.4%	42.0%	34.2%
1997	3714	60.7%	49.8%	40.4%
1998	3443	63.5%	50.4%	38.8%
1999	3122	62.7%	51.7%	43.6%
2000	2844	66.7%	55.4%	47.2%

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