

M. Jodi Rell

INFORMATION ... foundation for good policy

The Department of Mental Health and Addiction Services

A Healthcare Service Agency

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Thomas A. Kirk, Jr., Ph.D. Commissioner 860-418-6700

Governor

Improving Medical Care for People with Severe Psychiatric Illness

Diabetes is a growing health concern in the United States. The Centers for Disease Control and Prevention has reported that:

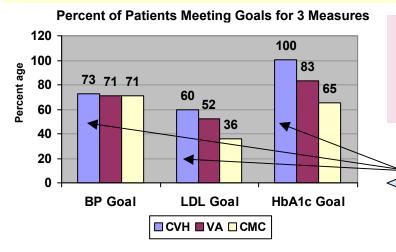
- The prevalence of diabetes rose dramatically during the 1990s.
- Approximately 4% of Americans had diagnosed diabetes in 1990, whereas an estimated 7.3% had diabetes in 2000.
- Nearly 800,000 new cases are diagnosed each year; 90 to 95% of them are type 2 (non-insulin dependent) diabetes.

Large clinical trials have shown that better control of risk factors such as blood pressure, and lipid levels (good and bad cholesterol in the blood) can reduce the frequency of developing complications in individuals with diabetes. Thus, the effective early recognition and the treatment of diabetes are important "treatment outcome measures" for any health care delivery system.

Of further concern for mental health providers are the data showing an *increased prevalence of type 2 diabetes* in patients with Schizophrenia and Bipolar Disorder and the association of new-onset diabetes with the use of the newer type of antipsychotic medications (atypicals).

"Best Practice" Produces Results

The DMHAS Connecticut Valley Hospital Medical Services Unit undertook a "best practice" initiative in July 2003 for the assessment and treatment of patients with diabetes. Outcome data were collected on patients meeting the clinical guidelines established by the American Diabetes Association for patients with Diabetes and then we compared our "best practice" results with those from the recent national initiative, **Translating Research into Action for Diabetes** (TRIAD) study in which quality measures of 8205 diabetic patients were compared between the Veterans Administration (VA) and commercial managed care (CMC) systems.



The three outcome measures examined were blood pressure (BP), LDL ("bad cholesterol"), and HbA1c (a measure of diabetes control over the prior 3-6 months). CVH's diabetes management results compare favorably with those in the TRIAD study.

Our data suggest that the diabetes care provided at Connecticut Valley Hospital equals or exceeds national standards in head-to-head comparisons.

The CVH Medical Staff, and Ambulatory Care Services clinicians in particular, are proud to be at the vanguard of DMHAS's efforts to provide superior preventative health care to the patients we serve.

¹ Performance Improvement Audit developed by Kenneth Freedman, MD and managed by Edward Drew, APRN. References upon request – contact Cynthia Conrad, MD, PhD at Cynthia.D.Conrad@po.state.ct.us.