

Diabetic friendly care for disabled The clinical experience of Diabetes Home Visit Service

Li-Hsin Chien¹, Chao-Tsen Kuo¹, Hsueh-Mei Lo¹, Hsiao-Ling Chuang¹, Jiun-Sheng Shie², Su-Huey Lo^{1,2,3}

¹ Diabetes Health Promotion Center, Tao-Yuan General Hospital, Ministry of Health and Welfare, Taiwan

² Department of Laboratory Medicine, Tao-Yuan General Hospital, Ministry of Health and Welfare, Taiwan

³ Section of Endocrinology and Metabolism, Tao-Yuan General Hospital, Ministry of Health and Welfare, Taiwan

【Introduction】 Diabetes Mellitus is a complex disorder, characterized by serious chronic complications if the metabolic disorder is not well controlled. The experience of outpatient clinics had shown that some disabled diabetic old patient had no laboratory result because they were inconvenient to go to hospital to receive blood test. In order to provide better service for these incapacitated patients, the Diabetic Home Visit Service was performed by Diabetic Home Visit Group (DHVG) since October, 2016. We can assist the clinicians by providing laboratory examination、medical suggestion and encourage the patients by showing our thoughtfulness.

【Purpose/Methods】 The DHVG enroll multi-aspect of diabetic specialist including: physician, nurse and medical technologist. The DHVG is actively participated in the care of disabled diabetic patients, the DHVG visit the diabetic patient at home each quarter to evaluate the general health condition, to provide medical consultation and to do the blood test. The final goal is a “comprehensive and considerate care of diabetes”.

【Results】 From 2016 to 2017, the DHVG had enrolled 10 diabetic patients(5 male and 5 female、age 82.7±9.3 y/o) and performed 25 times of home visiting, the average HbA1c before visiting was 7.7±1.8%, 6 months after regular home visiting was 7.5±1.6%.

【Conslusions】 Diabetes Home Visit Group actively and energetically participate in the share care of diabetic patients, can provide the patient regular laboratory test to improve blood sugar control and health-care quality, It's worth to promote to other health-care system.

Paired sample t-test			
	N	Average	SD
A1C Before	10	7.7	1.8
After	10	7.5	1.6
AC Before	10	149	102
After	10	129	27
TOTA Before	10	167	31
L CHOL After	10	169	34
TG Before	10	124	31
After	10	109	25
LDL Before	10	94	23
After	10	98	28
HDL Before	10	48	15
After	10	47	14
ACR Before	9	462	665
After	9	414	561
Cr Before	10	1.6	1.2
After	10	1.6	1.4
eGE Before	10	52	27
R After	10	57	32

