NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Indicators for the NICE menu for the QOF

Indicator area: Diabetes

Indicator: NM141

Indicator to be replaced: NM14

Date: August 2016

Indicator: NM141

The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 58 mmol/mol or less in the preceding 12 months.

Introduction

Diabetes is a chronic disease that occurs when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. There are 2 major types of diabetes. Type 1 diabetes occurs when the insulin-producing cells in the pancreas are destroyed and usually develops in children and young adults. Type 2 diabetes usually appears in middle-age or in older people, although more frequently it is being diagnosed in younger people who are overweight. Type 2 diabetes occurs when the pancreas does not produce enough insulin, or the insulin produced is not used effectively.

Rationale

This indicator measures the percentage of people with diabetes who have an HbA1c measurement of 58 mmol/mol or less. The aim of treatment is to reduce the risk of complications in people with type 1 or type 2 diabetes.

Strong clinical evidence shows that tight blood glucose control is associated with a reduction in diabetes complications. The NICE guideline for type 1 diabetes advises an HbA1c target of 48 mmol/mol (6.5%) to minimise the risk of long term vascular complications, with a further recommendation that

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diabetes services should document the proportion of adults with type 1 diabetes who achieve an HbA1c level of 53 mmol/mol (7%) or lower. The NICE guideline for type 2 diabetes recommends that people are treated to an HbA1c target of 48 mmol/mol (6.5%), but less stringent targets may be appropriate for people who are older or frail, those who are unlikely to benefit from longer-term risk reduction e.g those with reduced life expectancy, those at high risk of the consequences of hypoglycaemia and in people for whom intensive management would be inappropriate.

For the purposes of general practice indicators, 3 separate clinical practice targets are available: HbA1c 58, 64 and 75 mmol/mol (NM141, NM96, NM97). These targets are higher than the lower level recommended by the guidance, which may not be achievable or appropriate for all people. Given that there is strong evidence to support tight glycaemic control in people with type 1 diabetes, which is reflected in current NICE guidelines, this indicator aims to balance the risks and benefits for patients with type 2 diabetes. Younger patients with little comorbidity are more likely to benefit from tighter control, whereas less stringent goals may be more appropriate for patients with established CVD, a history of hypoglycaemia, or those who require multiple medications or insulin to achieve recommended targets.

Source guidance and recommendations

Type 2 diabetes in adults NICE guideline 28 (2015)

- Recommendation 1.6.8: In adults with type 2 diabetes, if HbA1c levels are not adequately controlled by a single drug and rise to 58 mmol/mol (7.5%) or higher:
 - reinforce advice about diet, lifestyle and adherence to drug treatment and
 - support the person to aim for an HbA1c level of 53 mmol/mol (7.0%) and
 - intensify drug treatment

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- Recommendation 1.6.9: Consider relaxing the target HbA1c level (see recommendations 1.6.7 and 1.6.8) on a case by case basis, with particular consideration for people who are older or frail or for adults with type 2 diabetes:
 - who are unlikely to achieve longer-term risk reduction benefits, for example, people with a reduced life expectancy
 - for whom tight blood glucose control poses a high risk of the consequences of hypoglycaemia, for example, people who are at risk of falling, people who have impaired awareness of hypoglycaemia, and people who drive or operate machinery as part of their job
 - for whom intensive management would not be appropriate,
 for example, people with significant comorbidities.

Type 1 diabetes in adults NICE guideline 17 (2015)

- Recommendation 1.6.6; Support adults with type 1 diabetes to aim for a target HbA1c level of 48 mmol/mol (6.5%) or lower, to minimize the risk of long-term vascular complications.
- Recommendation 1.6.9: Diabetes services should document the proportion of adults with type1 diabetes in a service who achieve an HbA1c level of 53 mmol/mol (7%) or lower.

Reporting and verification

See indicator wording for requirement criteria.

Further information

This is NICE indicator guidance for QOF, which is part of the NICE menu of indicators. This document does not represent formal NICE guidance. The NICE menu of indicators for QOF is available online at:

http://www.nice.org.uk/standards-and-indicators/gofindicators

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