

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

General practice indicator for the NICE menu

Indicator area: Diabetes prevention

Indicator: NM148

Date: June 2017

Introduction

The management of type 2 diabetes and its complications represents a significant cost to the NHS, with the incidence of type 2 diabetes expected to rise in line with increased levels of obesity and sedentary lifestyles. Therefore attention has shifted focus from disease management to disease prevention through targeted interventions and ongoing monitoring of people with a blood glucose above normal limits but not reaching the threshold for a diagnosis of diabetes. These people with an HbA1c of 42-47 mmol/mol or a fasting plasma glucose of 5.5-6.9 mmol/l are described as having non-diabetic hyperglycaemia.

Indicator:

NM148: The contractor establishes and maintains a register of all people with a diagnosis of non-diabetic hyperglycaemia (NDH).

Source guidance and recommendations

Type 2 diabetes: prevention in people at high risk NICE guideline PH38 (2012)

Recommendation 5: For people confirmed as being at high risk (a high risk score and fasting plasma glucose of 5.5-6.9 mmol/l or HbA1c of 42-47 mmol/mol:

- *Tell the person they are currently at high risk but that this does not necessarily mean that they will progress to type 2*

diabetes. Explain that the risk can be reduced. Briefly discuss their particular risk factors, identify which ones can be modified and discuss how they can achieve this by changing their lifestyle.

- *Offer them referral to a local, evidence based, quality assured intensive lifestyle-change programme. In addition, give them details of where to obtain independent advice from health professionals.*

Rationale

Patients with an elevated HbA1c between 42-47 mmol/mol (fasting plasma glucose 5.5-6.9 mmol/l) are at increased risk developing Type 2 diabetes. Maintaining a register of these patients at the general practice level will support systematic ongoing monitoring of these patients.

Reporting and verification

See indicator wording for requirement criteria.

Historically, coding of patients with an elevated blood glucose level has been variable. To recognise this variability in coding and to ensure that all affected patients are included in the denominator the register will incorporate codes for non-diabetic hyperglycaemia, pre-diabetes, impaired glucose tolerance and two consecutive elevated HbA1c or FPG recordings in a 3 month window (in the absence of a diagnostic code).

References

- Type 2 diabetes: prevention in people at high risk, NICE guideline PH38 (2012)