

Type 2 Diabetes Care and Management: A Comparison of German and American Approaches

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Type 2 diabetes (T2D) affects over 422 million people worldwide. Within their multi-payer healthcare system, Germany has employed Disease Management Programs ("DMP"s) nationwide to manage T2D since 2002. Studies have suggested T2D financial burden reduction and improved health outcomes since DMP implementation. No such standardized programs exist in the fragmented U.S. healthcare-system. This study evaluated German and American primary care physicians' opinions of efficacy of their nation's respective T2D management methods in improving health outcomes, healthcare costs, and quality of care. German physicians reported consistent protocol and resource availability for T2D management, while American physicians' responses varied widely by their clinical network and their patients' insurers. Strengths of Germany's T2D DMPs included lack of financial barrier to care and increased frequency of diabetic visits and patient accountability. Weaknesses included bureaucratic documentation and lack of customization. Strengths of American methods revolved around opportunity for innovation, resulting in increasing utilization of technological tools and motivational interviewing techniques. Weaknesses stemmed from systematic inequality of access, including lack of insurance-covered diabetes education, prohibitively high costs of medication, and lack of affordable preventive care. Despite these differences between German and American T2D care, both nations struggle with imperfect patient compliance and difficulty of achieving sustainable lifestyle changes. This study provides primary care physicians' opinions on best directions forward for chronic disease management, particularly addressing these universal challenges. Recommendations included widespread insurance coverage of dieticians, intensive diabetes education courses, and counselors, and increased use of team-based care, telemedicine & apps improving patient accountability, and value-based reimbursement.

Biography

Sarah has completed her BA in Biological Sciences and German at the age of 22 years from Northwestern University. She is currently applying for medical school for fall 2020 matriculation. She is working as a healthcare analyst at DaVita Integrated Kidney Care on their Patient Education team for her gap year between undergraduate and medical school. She presented her research comparing German and American chronic disease management methods at Northwestern University Research Exposition and has earned Honors recognition from Northwestern for her thesis on this research.

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