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Outcomes of the Pharmacist-Led Diabetes Intense Medical Management Clinic: Assessing the Impact of Coupling Education & Clinical Care in Veterans

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Abstract

A collaborative pharmacist-endocrinologist Diabetes Intense Medical Management (DIMM) Clinic (held ½ day per week) was developed at the Veterans Affairs San Diego Healthcare System to help primary care providers (PCP)meet diabetes specific compliance measures and to help patients achieve metabolic goals. Patients with type 2 diabetes mellitus and an A1C > 9% were referred to the DIMM Clinic by their PCP. These patients were treated by a pharmacist-CDE who combined clinical care with real time patient-specific diabetes education. Patients, treated for diabetes, HTN and lipids, were seen for 60 minute visits every 3 months with phone follow-ups as needed.After achieving A1C goals, patients were discharged back to their PCP. The primary outcome was mean change in HbA1C, 3 and 6 months after initial visit. Secondary outcomes were also compared 1) mean FPG, weight, BMI, cholesterol (LDL, HDL, TG), and blood pressure (BP) at3 and 6 months after initial visit, 2) Change in medication adherence 3)mean change in A1C 6 and 12 months post discharge.

Clinical outcomes (N = 79) show mean A1C was reduced significantly from 10.2% at enrollment to 8.8% at 3 months and 8.0% at 6 months ($p<0.001$). Percent of patients achieving goals was significantly increased for Triglycerides (TG)(3 and 6 months) and Fasting Plasma Glucose (FPG) (6 months) compared to baseline ($p<0.05$).Improved A1C was also correlated to an improvement in medication adherence ($p<0.05$), and for those patients who were referred back to their PCP once meeting metabolic goals there was no significant change ($p<0.01$) in A1C up to 12 months post discharge from the DIMM Clinic.

These results show significant A1C sustained reductions, improved metabolic parameters, and increased medication adherence wereachieved by patients with type 2 diabetes attending a pharmacist-led DIMM Clinic for six months.TheDIMMClinic model, combining clinical treatment with patient-specific diabetes education,is a successful approach for managing diabetes in a veteran population.