

# Perceptions of HbA<sub>1c</sub> in people with diabetes: A barrier to improving control?

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As a backdrop to the IMPROVE™ Control campaign, in this issue we bring you illuminating results from a recent survey of people with diabetes receiving insulin therapy. The survey, which was commissioned by Novo Nordisk, explored the respondents' attitudes toward information provision and their knowledge of HbA<sub>1c</sub>, with results for the latter being particularly enlightening.

## Survey results

Overall, 10 500 people with diabetes were invited to participate by mail in July and August 2008, and 3750 responses were analysed. Alarming, the data revealed that more than one-third of the people surveyed had not heard of the term "HbA<sub>1c</sub>" (Figure 1). Given this, it is not surprising that only half of the respondents reported that they know what HbA<sub>1c</sub> measures (Figure 2), and more than half of those surveyed did not know their current HbA<sub>1c</sub> level (Figure 3). Of those who did know their HbA<sub>1c</sub>, 52% reported a level that was  $\leq 7.5\%$ .

## Clinical implications

One of the key messages from NICE's 2008 guideline on the management of type 2

diabetes is that people with diabetes should be involved in making decisions about their target HbA<sub>1c</sub> level (National Collaborating Centre for Chronic Conditions [NCCCC], 2008).

Furthermore, professionals were advised to "encourage the person to maintain their individual target unless the resulting side effects (including hypoglycaemia) or their efforts to achieve this impair their quality of life" (NCCCC, 2008).

The result that a substantial proportion of respondents in this survey reported that they have not heard of the term HbA<sub>1c</sub>, that they do not know what HbA<sub>1c</sub> represents, or that they do not know their current HbA<sub>1c</sub> level, may not be surprising to healthcare professionals working with people with diabetes. However, given NICE's recommendations, these findings seem to be symptomatic of a key barrier to improving glycaemic control; there is clearly much work still to be done. ■

National Collaborating Centre for Chronic Conditions (2008) *Type 2 diabetes: national clinical guideline for management in primary and secondary care (update)*. Royal College of Physicians, London

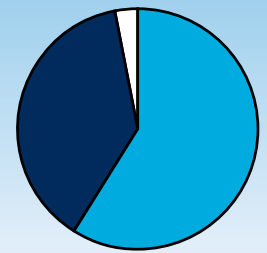


Figure 1. Results for the question, "Have you heard of the term HbA<sub>1c</sub>?" Yes (light blue) 59%; no (dark blue) 38%; not answered (white) 3%.

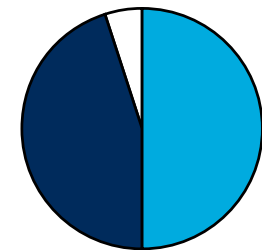


Figure 2. Results for the question, "Do you know what HbA<sub>1c</sub> measures?" Yes (light blue) 50%; no (dark blue) 45%; not answered (white) 5%.

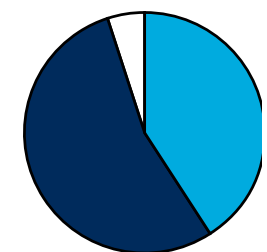


Figure 3. Results for the question, "Do you know what your current HbA<sub>1c</sub> is?" Yes (light blue) 41%; no (dark blue) 54%; not answered (white) 5%.

## The IMPROVE™ Control Campaign

The Global Task Force on Glycaemic Control is a group of physicians and specialists in the field of diabetes from around the world that is working in collaboration with Novo Nordisk with the ultimate aim of identifying and developing practical solutions to the global problem of poor glycaemic control in people with diabetes. Since early 2008, the *Journal of Diabetes Nursing* has featured articles and submissions under the banner of IMPROVE™ Control – a global public awareness campaign focused on the need for improved control, which forms part of the Task Force's work. Throughout 2009, the journal will continue to bring you articles on the barriers to good glycaemic control, and submissions from *you*, our readers, outlining the strategies you have used to help people with diabetes improve their control.

For example, perhaps you have implemented a new educational session in your area that has helped break down barriers to control, or maybe you have set up a new referral pathway that has helped improve HbA<sub>1c</sub> levels. The *Journal of Diabetes Nursing* would like to help you share your practical solutions for improving control, no matter how big or small, with other nurses working in diabetes. We encourage you to take part in this global initiative by calling 020 7627 1510, or emailing james@sbcommunicationsgroup.com.



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