

# Cost-effectiveness of care for patients with type two diabetes: an evaluation of an innovative shared diabetes care model

**Submission date**

26/02/2007

**Recruitment status**

No longer recruiting

☒ Prospectively registered

☐ Protocol

**Registration date**

26/02/2007

**Overall study status**

Completed

☐ Statistical analysis plan

☒ Results

**Last Edited**

30/06/2014

**Condition category**

Nutritional, Metabolic, Endocrine

☐ Individual participant data

**Plain English summary of protocol**

Not provided at time of registration

## Contact information

**Type(s)**

Scientific

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

# Study information

## Scientific Title

### Study objectives

The intervention will primarily affect the level of patient control with regard to glycemia, lipid levels and blood pressure. We will expect a substantial decline in the occurrence and severity of complications and mortality and an improved quality of life. The innovative shared diabetes care is expected to be more cost-effective than the usual diabetes care.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Not provided at time of registration

### Study design

A quasi-experimental pre-test-post-test control group design

### Primary study design

Interventional

### Secondary study design

Non randomised controlled trial

### Study setting(s)

Not specified

### Study type(s)

Quality of life

## Participant information sheet

### Health condition(s) or problem(s) studied

Diabetes Mellitus type two (DM type II)

### Interventions

An innovative shared diabetes care model ('ketenzorgmodel') will be implemented in general practices in Amstelland. The 'ketenzorgmodel' will be implemented with a central organisation of the diabetes care with a central database, a central coordinating role for diabetes nurses (changed professional roles), and an active recall system. The annual diabetes check is offered to patients by the central organisation, in combination with patient education, by a diabetes nurse and a consultation with a dietician. In addition, structured education will be offered to general practitioners and their assistants, and a diabetes nurse will support diabetes care in general practice.

Diabetes patients in the control group will receive the current usual diabetes care. The control group will consist of patients of GP's who are affiliated to the Netherlands Institute for Health Services Research (NIVEL) Continuous Morbidity Registration Centres (CMR sentinel stations

[CMR-Peilstations])). NIVELs 'CMR-Peilstations' constitute a representative group of 60 Dutch GPs in 45 practices throughout the Netherlands.

## **Intervention Type**

Other

## **Phase**

Not Specified

## **Primary outcome measure**

1. The risk of developing coronary heart disease (using the United Kingdom Prospective Diabetes Study [UKPDS] risk engine at baseline, two years before and year one and two after baseline)
2. All direct and indirect costs (cost diary)
3. Costs per life year gained

## **Secondary outcome measures**

1. Absolute levels of fasting glucose
2. HbA1c level
3. Blood pressure
4. Cholesterol
5. Percentages adequately controlled patients (in accordance with the Dutch College of Family Physicians [NHG] standards)
6. Diabetes specific and generic quality of life
7. Patient satisfaction
8. Quality of life
9. Quality of care as experienced by the patient:
  - a. percentage of patients that received all three-monthly check-ups
  - b. a complete annual check-up
  - c. were hospitalised
10. Total mortality measured by life expectancy
11. Total morbidity measured by morbidity-free life expectancy and the Net Present Value (NPV) of the number of life years gained
12. Quality Adjusted Life Years (QALYs) gained for the intervention scenario compared to the current practice scenario
13. The NPV of total intervention costs
14. The NPV of total costs of care for diabetes and its complications
15. Incremental costs per QALY gained

## **Overall study start date**

01/03/2007

## **Completion date**

01/01/2010

## **Eligibility**

### **Key inclusion criteria**

1. Patients with type two diabetes
2. Age 40 to 75 years
3. Written informed consent

4. Capable to fill in questionnaires
5. Understanding of Dutch language

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Not Specified

**Target number of participants**

Not provided at time of registration

**Key exclusion criteria**

Patients will be excluded for participation in this study if no beneficial effects can be expected in favour of the patient, according to the opinion of the General Practitioner (GP).

**Date of first enrolment**

01/03/2007

**Date of final enrolment**

01/01/2010

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre**

**Emgo-Instituut**

Amsterdam

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1081 BT

## **Sponsor information**

**Organisation**

VU University Medical Centre (The Netherlands)

**Sponsor details**

EMGO-Institute

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**Sponsor type**

Hospital/treatment centre

**Website**

<http://www.vumc.nl/english/>

**ROR**

<https://ror.org/00q6h8f30>

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

The Netherlands Organisation for Health Research and Development (ZonMw) (The Netherlands)

## Results and Publications

**Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date****Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

| Output type                     | Details | Date created | Date added | Peer reviewed? | Patient-facing? |
|---------------------------------|---------|--------------|------------|----------------|-----------------|
| <a href="#">Results article</a> | results | 25/06/2014   |            | Yes            | No              |