DOCTORS are urging NHS emergency planners not to underestimate the disruption to hospital and GP services caused by the impact of a swine flu epidemic among the UK’s 2.4m diabetes patients.

As latest figures showed another rise in the number of swine flu cases, the Association of British Clinical Diabetologists (ABCD) issued its latest guidance to both patients and local diabetes services to help them manage the risks posed by a potential pandemic.

The association said the UK’s growing diabetic community were particularly at risk from swine flu, with research showing they were six times more likely to be hospitalised as a result, compared to people without diabetes. Diabetes patients were also at significantly increased risk of excessive mortality and morbidity.

It fears that an acute influenza infection could result in a potential ten-fold increase in the number of urgent new insulin starts.

“The impact of these risks, and the way they are managed both in hospitals and in primary care, needs expert assessment as part of contingency planning at a local level,” said former ABCD Chairman, Professor Ken Shaw, who coordinated the drawing up of the guidance.

“Emergency planners are doing a very good job in unprecedented circumstances – but diabetologists have an important part to play in working with them to identify, and minimise, the risks posed to diabetes patients, and the knock-on effects to the wider NHS.

“In a full-scale pandemic, hospital services could be stretched to, and even beyond, capacity. Many patients with diabetes will almost certainly need advice on medical management outside their usual care setting.”

He added: “Influenza, as with any infection, has the potential to aggravate diabetes, resulting in deteriorating blood glucose levels (hyperglycaemia) and a consequent classic vicious cycle, further impairing body defences to infection.”

ABCD is the national organisation representing more than 500 consultant physicians and registrars in Britain who specialise in diabetes mellitus – an increasingly common condition that affects an estimated 2.4 million people, although the actual figure is feared to be far higher.
In its plan for local diabetes services, ABCD is urging:

- The launch of a local multi-disciplinary team, across primary and secondary interfaces, to address contingency planning issues in the event of an influenza pandemic.
- The roll-out of its ‘Be Prepared’ education campaign, which provides patients and healthcare professionals with greater awareness and understanding of what to expect and what needs to be done.
- A review of what routine clinical services should be suspended – perhaps for as long as four months – and what essential services need to be safeguarded, as staff are redeployed to other areas and likely to suffer from greater levels of sickness themselves.
- Better communications with patients with diabetes, as well as between healthcare professionals, as medical advice is likely to be required with some urgency. Primary care should have direct and speedy access to specialist diabetes advice, and an integration of care predominantly in the community is likely to be required.

As part of its advice to people with diabetes, ABCD said patient self-management with the support of local specialist diabetes expertise was the key to a successful outcome.

Closer attention to diabetes control will be needed – in most cases by careful blood glucose self-monitoring, and adjusting treatment as appropriate. In particular, insulin should not be stopped and often the dose may need to be temporarily increased.

It advises that patients should advise their GP by phone when suffering from influenza and be aware of serious symptoms – such as increased drowsiness, dehydration and respiratory distress - which may indicate urgent need for hospitalisation.

**ABCD - summary of key messages**

- People with diabetes are more vulnerable to influenza infection, and at significantly increased risk of excessive mortality and morbidity
- Good diabetes control lessens susceptibility, reduces risk of respiratory complications and improves recovery
- Patients should be educated and aware of the special circumstances affecting diabetes in the event of influenza infection (‘Be Prepared’)
- H1N1 vaccination is advised for people with diabetes as a priority group
- A dedicated multidisciplinary diabetes team should address local contingency planning issues to meet increase in acute service demands during pandemic, including cessation of routine clinical work.
- Patients will need to have speedy & effective access to specialist diabetes
advice within the community to minimise need for hospitalisation and to ensure optimal management for recovery

ENDS

The above guidance has been drawn together by:

- Prof Ken Shaw, former Chairman of ABCD, an honorary consultant physician, specialising in general medicine, diabetes, endocrinology and metabolism based at Queen Alexandra Hospital, Portsmouth Hospitals NHS Trust and Emeritus Professor of Medicine, University of Portsmouth.

- Dr Peter Winocour, Chairman of AMCD and consultant physician, Queen Elizabeth II Hospital, East and North Herts NHS Trust; and

- Dr Ian Gallen, Honorary Secretary ABCD, consultant physician and endocrinologist, Buckinghamshire Hospitals NHS Trust.

Further press information and interview opportunities with the above available through Richard Chew 0845 389 2626