

Clinical: Medical
Proactive Release 14 September 2018



31 August 2018

[REDACTED]
Stuff - Fairfax Media
PO Box 1327,
Shortland St, Auckland, 1140

E-mail: [REDACTED]

Dear [REDACTED],

Official Information Act (1982) Request

I write in response to your Official Information Act request, dated 15 August 2018. You requested the following information:

- 1. Data on how many people within the DHB, aged 15 to 35 have been diagnosed with *Type 2 Diabetes* between 2010 and 2018, broken down by age (five year bands) and year.**
- 2. Data on how many people within the DHB, aged 15 to 35 have been diagnosed with *Pre-diabetes* between 2010 and 2018, broken down by age (five year bands) and year.**
- 3. *Internal communications* about Type 2 diabetes/ Pre-diabetes in people aged 15 to 35 years, between 2015 and 2018, (including but not limited to reports, memos, meeting notes, emails, briefing documents).**
- 4. *Communications between the DHB and other parties* about Type 2 Diabetes/ Pre-diabetes in people aged 15 to 35 years, between 2015 and 2018, (including but not limited to reports, memos, meeting notes, emails, briefing documents).**

And noted, **as the information will be of public interest, I ask that any fee is waived.**

On further discussion on the scope of your request with Ms Michelle Webb (Auckland DHB) on 16 August, you clarified that you were primarily interested in receiving:

Formal reports about the increasing prevalence of Type 2 Diabetes/ Pre-diabetes in people aged 15 to 35 years between 2015 and 2018.

Our responses to each of your questions for the Counties Manukau district are below.

Firstly for context, we note that Counties Manukau District Health Board (CMDHB) provides health and disability support services to a large (in excess of 557,000 people), and ethnically diverse community. We acknowledge that we have high rates of chronic health conditions (including Diabetes) occurring in Counties Manukau. Comparison of prevalence data across different communities and regions needs caution applied, as there are a variety of contributing health and environmental factors.

Our Annual Plan 2017/18 (publicly available on the CMDHB Website), outlines a number of strategies and actions to improve health outcomes for people both at risk of developing Diabetes, and those already living with Diabetes in our community. In addition, the four Northern Region DHBs have outlined a number of plans and actions for the Northern Regional Health Plan 2017/ 18:

- <http://www.nra.health.nz/assets/Documents/NRHP-2017-18-docx.pdf>

The Northern Region Diabetes Network Meeting was established in 2011, to provide regional clinical leadership on diabetes prevention and management across both primary and secondary care with the aim of achieving system wide integration and improvement in health outcomes. As Clinical Lead for this group, Dr Catherine McNamara (from Waitemata DHB) did recently (May 2018) present to the network on improving outcomes for people living with Type II Diabetes (age 20-45 years) in the Northern Region.

There is also useful information publicly available on the Ministry of Health website:

- <https://www.health.govt.nz/our-work/diseases-and-conditions/diabetes/about-diabetes>

The Virtual Diabetes Register (VDR) data (supplied on the Ministry of Health website) has data per DHB from 2010; however, please note that prior to 2016 the VDR results were calculated using a different algorithm, so trends data from this should be used with caution.

Please also note that international medical jurisdictions have different definitions of pre-diabetes, and the risk of developing diabetes depends on the definition. You may wish to review a helpful summary on the topic in the following article published in British Medical Journal (2017):

- <https://www.bmj.com/content/356/bmj.i6538/rr-11>

Question 1 and 2: Below are four **tables**: These provide the total numbers of people in the specified age brackets living in Counties Manukau and enrolled in a Primary Health Organisation, who have been tested and then diagnosed with Pre-Diabetes or Diabetes for 2015-2017. The Pre-Diabetes and Diabetes numbers provided are based on NZ Clinical definitions, further details on the methods and definitions used are available on request.

Age	2015	2016	2017
15-19	756	679	658
20-24	1,478	1,419	1,381
25-29	2,965	2,881	2,848
30-34	4,827	4,825	4,820
Total	10,026	9,804	9,707

Table 1: Number of people with **Pre-Diabetes**

Age	2015	2016	2017
15-19	2.0%	1.8%	1.8%
20-24	4.0%	3.8%	3.7%
25-29	8.2%	7.6%	7.2%
30-34	14.0%	13.6%	13.0%

Table 2: Age specific **Pre-Diabetes** prevalence

Age	2015	2016	2017
15-19	183	182	178
20-24	307	325	347
25-29	533	551	600
30-34	899	947	970
Total	1,922	2,005	2,095

Table 3: Number of people with **Diabetes**

Age	2015	2016	2017
15-19	0.49%	0.49%	0.48%
20-24	0.82%	0.87%	0.92%
25-29	1.47%	1.46%	1.51%
30-34	2.61%	2.67%	2.61%

Table 4: Age specific **Diabetes** prevalence

We are unable to provide this level of data from prior to 2015, as the data is derived from Testsafe (Laboratory) results, that were not collated and available prior to 2015. Our data system cannot currently definitively differentiate between Type I or Type II Diabetes.

To further assist you in interpreting the data supplied, we note that the reducing numbers of Pre-Diabetes cases for this period should not be seen as a true fall in prevalence, but is related more to a number of other factors, including the movement of people between districts, particularly in younger age groups, and also due to new arrivals in the district. Equally, in this age cohort, many individuals may not have testing done to identify Pre-Diabetes status.

Currently, Pre-diabetes status is based on having a single test result above a defined threshold. The current system parameters mean if a person has repeated tests done, they may exceed the Pre-diabetes range once and be noted as pre-diabetic, irrespective of future testing results that are outside the threshold. Therefore, any conclusions on time-trends inferred from the 3 years of data supplied should only be used with caution.

Prevalence and trend data are also positively influenced by ongoing work on improving primary health processes for screening and data coverage, and a focus on CVD risk assessment as opposed to the

underlying incidence of diseases. As we improve the ways we screen people, our data coverage, and also the methods of data repository and analysis, we are noting changes in trends.

Regarding Questions 3 and 4; and your refined request for formal Reports on increasing prevalence in Diabetes in young people, we note the following;

Our Diabetes services (both primary and secondary care) advise that from a service delivery and health improvement stance, currently the majority of our DHB focus is on improving outcomes for all/ any patients with poorly controlled diabetes, rather than a particular focus on younger people.

We have not prepared any formal reports (either internal or external) on this specific issue, however we continue to work within the regional and DHB annual plans to improve diabetes identification, outcomes, reduce complications and support a “Living well with Diabetes” framework and measures.

We are providing **(attached)** copy of a proposal from June 2016 for additional Clinical Nurse Specialist FTE capacity to support development of a Youth / Adolescent Diabetes service. The proposal includes for context international and local data on prevalence, with references and since that was introduced there has been further service development. Recently, the Diabetes Services completed a stocktake against twenty quality standards for Diabetes, including for youth, and the excerpt is provided here **(attached)**, noting provision of youth focused services and clinics.

I trust this information satisfactorily answers your query. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act.

Please note that this response or an edited version of this may be published on the Counties Manukau DHB website.

Yours sincerely,



Gloria Johnson
Chief Executive (Acting)