**Management of adults with diabetes on the haemodialysis unit; experience of a District General Hospital**

**Introduction:**

Diabetes mellitus (DM) is the leading cause of end stage renal disease (ESRD) in the developed world accounting for 40% of the new cases of ESRD in US and 25 % in UK. With rising prevalence of diabetes, it is expected to see more diabetes related ESRD in future.

Joint British Diabetes Societies (JBDS) have put forward recommendations as standard of care for these patients and we aimed to audit our performance against these standards.

**Methodology**:

Haemodialysis patients with a registered diagnosis of diabetes on “Proton” software were identified. We asked patients questions regarding their diabetes care (follow up, monitoring, hypoglycaemia awareness and management, and patient education). Clinical data were collected through patient records.

**Results**:

54 patients, age range 35 to 88 years old, 32 males were identified of them 6 had type 1 DM and 44 had Type 2 DM, 3 steroid-induced DM and one actually had prediabetes. Eight patients were diet controlled.

56 % had regular GP checks and 28 % community diabetes specialist nurse visits. 93% of patient had 3 monthly HbA1C monitoring of which 61% were out of their recommended target range.

81% of patients related that they regularly self-monitor their capillary blood glucose (CBG). 75% would recognize the symptoms and knew how to manage hypoglycaemia.

24 patients were on oral hypoglycaemic agents of them 34% were on sulphonureas (that is not recommended in haemodialysis patients). 69% of the patients had received some form of education for diabetes either by renal dietician or in the community.

**Conclusion**:

All elements of care that we looked into in these patients were less than expected (100%) and some very poor such as regular follow up. Patients with ESRD and diabetes have multiple factors contributing to a potential poor health outcome.

Improved monitoring, regular follow up, patient education for self-management might improve their overall health status and can potentially be achieved by setting up a joint service with diabetes team.