Physician Communication Improves Diabetic Eye Exam Adherence
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For patients with diabetes, written communication to and from ophthalmologists and primary care physicians (PCPs) is associated with increased follow-up adherence to diabetic eye examinations, a new study has suggested.

Philip P. Storey, MD, MPH, from the University of Southern California, Los Angeles, and colleagues published the results of their study in the January 2016 issue of *Retina*.

"In our retrospective study of 1968 patients with diabetes seen at an urban ophthalmology center, written communication from an ophthalmologist to a PCP and communication from a PCP to an ophthalmologist were independently and significantly associated with increased adherence to diabetic eye examinations within the time frame recommended by the [American Academy of Ophthalmology (AAO)]," the authors write. "Our overall eye examination adherence rates were low, similar to previous studies, but significantly better among patients with documented physician communications."

Diabetes is the leading cause of blindness worldwide. Diabetic retinopathy (DR) develops in most people who have diabetes for 15 years or longer and affects an estimated 28.5% of US patients with diabetes who are older than 40 years. However, it is well recognized that early detection and treatment of DR significantly reduces the risk for vision loss. Nevertheless, although current guidelines from the AAO therefore recommend regular screening examinations for all individuals with diabetes, 30% to 50% of these patients do not adhere to these recommendations.

Coordination of care through improved communication between healthcare providers, including between PCPs and ophthalmologists, can improve patients’ adherence to recommended care. Indeed, data from two recent surveys demonstrated that poor communication between physicians and eye care providers was one of the greatest barriers to effective care of patients with diabetes.

Therefore, Dr Storey and colleagues aimed to investigate the association between written communication between ophthalmologists and PCPs and patients’ adherence to diabetic eye examination recommendations.

The researchers performed a retrospective cohort analysis of 1968 patients from 2007 to 2010. The primary outcome of the study was timely adherence to follow-up diabetic eye screening. The researchers considered patients adherent if they underwent dilated fundus examination within the AAO’s acceptable time frame after their initial visit (within 15 months for mild DR, within 12 months for moderate DR, and within 4 months for severe DR).

In particular, univariable analysis showed that written communication from an ophthalmologist to a PCP ($P = .0018$) and from a PCP to an ophthalmologist ($P = .0002$) was associated with increased patients’ adherence to follow-up DR examination recommendations. In addition, after controlling for other variables, the multivariable analysis also showed that written communication from an ophthalmologist to a PCP was associated with a 1.47 times (95% confidence interval, 1.11 - 1.94; $P = .0071$) higher odds of a patient adhering to the AAO recommendations, whereas written communication from a PCP to an ophthalmologist was associated with 1.53 times (95% confidence interval, 1.03 - 2.29; $P = .036$) higher odds of adherence.

"This is the first published study to date to demonstrate that communication between physicians has a significant association with follow-up adherence for diabetic eye care," the authors write.

"[W]e found written communication between an ophthalmologist and a PCP to be associated with improved adherence to recommendations for follow-up diabetic eye examinations. Given the morbidity of diabetic retinopathy and the low national rates of diabetic eye examination adherence, communication between health care team members serving...

patients with diabetes deserves further exploration," the authors conclude.

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