

# iDENTify: Identification of type 2 diabetes & pre-diabetes in the oral health setting

## Background:

In Australia it has been estimated that for every four adults with diagnosed diabetes, there was one who was undiagnosed and three people at high risk of diabetes<sup>(1)</sup>. The high prevalence of undiagnosed diabetes and the increased risk of diabetes and cardiovascular disease in those with pre-diabetes, highlights the importance of early detection of the disease<sup>(2)</sup>.

Periodontal disease has been described as the “sixth complication” of diabetes<sup>(3)</sup> and as over half of Australia adults visit the dentist annually for a check-up<sup>(4)</sup>, the oral healthcare setting affords a unique opportunity to screen for prediabetes/type 2 diabetes.

## Aims:

1. To describe the current knowledge, attitudes and practices of **Victorian Oral Health Professionals** (OHP) around type 2 diabetes and pre-diabetes identification, management and patient referral.
2. To test an oral health practice-based model that identifies patients with pre-diabetes or type 2 diabetes and facilitates early intervention.
3. To develop pathways of care between oral health professionals and general medical practitioners which, whilst focusing on type 2 diabetes diagnosis, will have benefits for other aspects of oral care.

## Methods:

Oct 17 – Feb 2018	Stage 1 - Part 1	Attitude and opinions of OHPs on screening for type 2 diabetes and pre-diabetes in the oral healthcare setting	Quantitative Survey
Mar 18 – Jun 2018	Stage 1 - Part 2		Qualitative Interviews
Oct 18 – Jun 2019	Stage 2 - Wave 1	Screening for early identification of diabetes and pre-diabetes in the oral healthcare setting	Clinical Study - Research Assistant supported
Jul 18 – Dec 2019	Stage 2 - Wave 2		Clinic Study – Practice lead recruitment

## Stage 1 Results:

Quantitative Survey	- Online survey - 183 respondents.
Qualitative Interviews	- Phone interviews. - 11 Oral Health Professionals (8 General Dentist, 2 Dental Hygienists & 1 Oral Health Therapist)

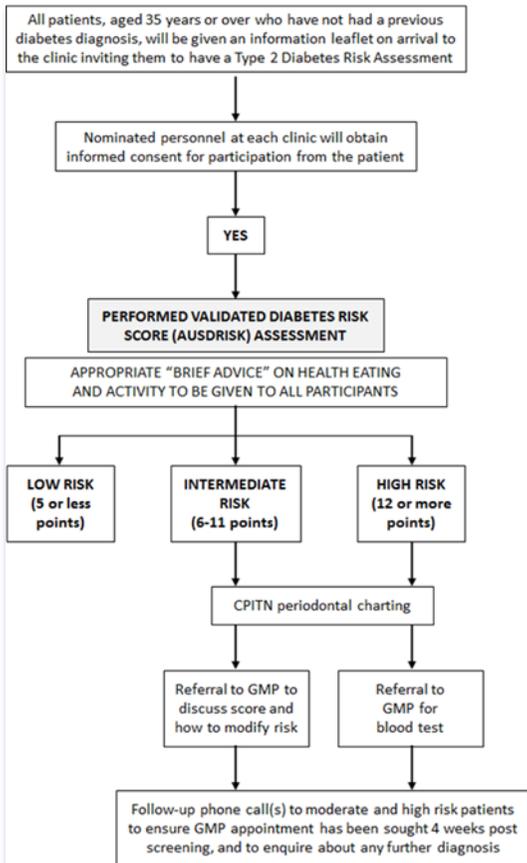
- The oral health care setting is an appropriate setting for medical screening, and oral health professionals are willing to participate in screening for prediabetes/ type 2 diabetes.
- The OHPs saw medical screening as being part of their role as an oral healthcare professional and important to the overall health of their patients.
- For the successful implementation of a screening programme several barriers need to be addressed, including time, cost, resources and legalities.
- For screening to be successful the OHPs recognised the need to collaborate with GMPs who would diagnose, provide follow-up and be responsible for the medical management of the patient.
- Achieving coordinated, cohesive and effective care for the patient required interprofessional communication, well defined referral pathways and follow-up.

## References

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3. Loe H. Periodontal disease: Sixth complication of diabetes Mellitus. *Diabetes Care* 1993;16:324–34.
4. Australian Institute of Health and Welfare, Harford JE & Islam S 2013. Adult oral health and dental visiting in Australia: results from the National Dental Telephone Interview Survey 2010. Dental Statistics and Research Series no.65. Cat.no.DEN227. Canberra: AIHW

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## Stage 2 Patient Recruitment and Referral Process



## Preliminary Results for Stage 2 Wave 1

Data collection currently in progress, wave 1 due for completion end of June 2019.

Total Dental Practices	15	Metro	11
		Rural	4
Total OHPs	38	Metro	29
		Rural	9

Total oral health patient participants recruited	218
Participants referred to GMP	78 (51 F / 27 M)
Results Received from GMP	37 (24 F / 8 M)
Positive type 2 diabetes or pre-diabetes results	0

AUSDRISK Scores	
Low Risk	20
Medium Risk	82
High Risk	115

## Oral Health Patient Participant Feedback:

*"Great initiative, happy to be involved".*

*"Can be accomplished at same time as dental appointment, so not doubling up on appointments, easy to include it".*

*"Has motivated me to lose some weight to reduce my risk".*

*"Not useful to me personally but happy to contribute to the study".*

*"I cannot really understand why AUSDRISK thinks that the dentist is the place to go through the risk".*



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