



# Primary Health Care Information

## Diabetes Care Gaps and Disparities in Canada

### Information Sheet

PHC is the most common health care experienced by Canadians and improvements are essential. Our goal is to establish new pan-Canadian data sources that can be used to better understand PHC across Canada, report on PHC indicators and inform health policy and decision-making at various levels.

### Who We Are

Established in 1994, CIHI is an independent, not-for-profit corporation that provides essential information on Canada's health system and the health of Canadians. Funded by federal, provincial and territorial governments, we are guided by a Board of Directors made up of health leaders across the country.

### Our Vision

CIHI's vision is to help improve Canada's health system and the well-being of Canadians by being a leading source of unbiased, credible and comparable information that will enable health leaders to make better-informed decisions.

In Canada, most adults living with diabetes get regular care. However, there are notable gaps between recommended diabetes care practices and the care patients say they receive. Gaps in care may result in serious complications for diabetic patients and increased costs for the health care system.

More than 2 million Canadians have diabetes, and this figure is expected to more than double by 2030. While prevalence is rising, less than one-third of adults with diabetes reported receiving all four of the recommended care components from their health providers.

### Gaps in Diabetes Management

- Fewer than one in three adults with diabetes (32%) reported that they received all four recommended care components.
- Only 51% of adults with diabetes reported having their feet checked by a health professional within the last year of the study period.
- Just over half (58%) checked their feet for sores or had a family member or friend check them at least once a week.
- Just 66% received a dilated eye exam in the previous two years.
- Only half of adults with diabetes (50%) reported that they self-monitored their blood glucose daily.
- Almost half (46%) of those with diabetes did not have a treatment plan.

### Disparities in Canada

- Adults in the oldest age group—65 and older—had the highest prevalence of diabetes (17%).
- Adults in the lowest-income group were twice as likely to have diabetes (8%) as adults in the highest-income group (4%).
- Adults with diabetes who live in lower-income households were less likely to receive recommended diabetes care (21%) than those in higher-income households (42%).

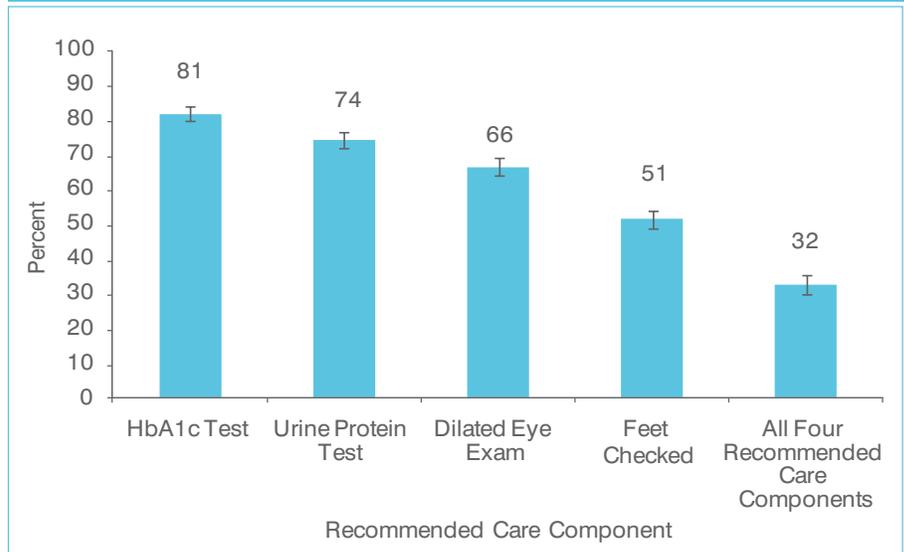
## Key Findings

Primary health care (PHC) patient survey results on diabetes care reveal the following:

- Not all adults with diabetes reported receiving all four clinically recommended tests from their health providers.
- Adults with diabetes living in lower-income households are less likely than those in higher-income households to receive recommended diabetes care.
- People with diabetes reported self-management care gaps.
- Improvements are needed to ensure that adults with diabetes receive all four clinically recommended tests.
- Improvements are needed to help people manage their diabetes better.
- There is room for improving diabetes care across Canada.

- There was significant variation by province in the proportion of adults receiving all four recommended care tests. Results ranged from lows of 21% in Newfoundland and Labrador and 22% in Manitoba to highs of 39% in British Columbia and 37% in Saskatchewan.

Age-Standardized Percentage of Adults 18 and Older With Diabetes Who Received Recommended Care Components From a Health Care Professional, Canada, 2007



**Source**

Canadian Community Health Survey, 2007, Statistics Canada.

## Looking Ahead

CIHI is currently working with jurisdictions, clinicians and other health organizations across the country to promote the development and use of common data standards for electronic medical records used in primary health care settings. The increased availability of standardized data on diabetes care will support efforts to monitor the diabetes care gap and increase the proportion of people with diabetes receiving the recommended care.

**Want more information?**

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