

‘Hovering on the borderline’: what patients really think of a prediabetes diagnosis

What we knew

Prediabetes is a ‘warning sign’ that blood sugar levels are higher than normal.

If ignored, blood sugar levels can increase and a person can go on to develop type 2 diabetes.

In England, the NHS Healthier You Diabetes Prevention programme is offered to adults who have raised blood sugar levels. It offers lifestyle advice to help reduce people’s risk of developing type 2 diabetes.

Not all people offered a place on the NHS Healthier You Diabetes Prevention programme attend and we wanted to find out the reasons why.

We know that generally there is inequality when it comes to people accessing health programmes and this can lead to greater health inequalities in the population.

What we did

We wanted to know how patients who had raised blood sugar levels were told about their risk of developing diabetes and how they were offered the NHS Healthier You Diabetes Prevention Programme. We also wanted to understand how they assessed their future risk of developing diabetes and how they felt about being labelled ‘prediabetic’.

We went into GP practices in the North West of England to find out how they informed patients with raised blood sugar levels about their risk of developing diabetes. Some practices asked patients to attend a consultation to discuss their diabetes risk while others sent their patients a letter. Contents of letters varied – some were one page in length and others included lifestyle advice and information about diabetes. All types of letters invited eligible patients to attend the NHS Healthier You Diabetes Prevention Programme.

We observed **15 clinician-patient consultations** and interviewed **43 patients** at high risk of developing diabetes, of these, **35** had been informed of their risk via letter.

What we found

In the consultations we observed, clinicians often talked about prediabetes as a ‘condition’ or a ‘disease’. This led to confusion as some patients were unsure if prediabetes was a ‘less severe’ version of diabetes or a ‘risk’ status. In interviews, patients often did not use the term ‘prediabetes’ but instead described they were on the ‘borderline’ or ‘periphery’ of diabetes.

The significance of ‘being on the borderline’ of diabetes differed. Some who received a letter chose to ignore it and said that their risk was unlikely to be serious or their GP would not have just sent a letter. But some who had been told of their risk during a consultation also downplayed their likelihood of developing diabetes.

Resisting the risk of diabetes happened for a number of reasons:

- Some questioned the prediabetes label because they considered themselves and their lifestyle as healthy – for them this meant not eating a diet high in sugar or processed foods.
- Some were confused about the link between body weight and diabetes risk. Some described themselves as ‘a bit overweight’ but downplayed this as a risk factor if they considered their lifestyle habits to be healthy.
- The stereotype of diabetics as ‘obese’ was common in interviews and some wanted to distance themselves from this stereotype and downplay their risk.
- Some questioned how long they might stay in a prediabetes state even if they did not make lifestyle changes.
- In interviews, some accepted their risk of diabetes but felt unable to make lifestyle changes because they had to manage other health conditions such as osteoarthritis or mental health problems. So, prediabetes was not considered a priority.
- Some admitted that they were not concerned about getting type 2 diabetes because they felt it was a low risk condition that could be managed by medicines, which might stop them changing to healthier lifestyle habits.

What this means

We found that patients’ attitudes towards prediabetes were mixed:

- Some felt they were ‘on the border’ of an illness that they might be able to prevent.
- Some were not motivated to try to prevent diabetes as they considered they were at low risk (despite clinical evidence to suggest they were at high risk).
- Some were willing to ‘take a chance’ as they did not want to make the lifestyle changes to prevent diabetes.
- Some had other illnesses that took priority over their prediabetes risk.

Most patients that we interviewed had received a letter only and had not been informed about their prediabetes risk in a consultation. We think that when patients come in for their blood test to check for prediabetes, clinicians could raise awareness of the causes and the consequences of prediabetes. This might prevent some patients from ignoring the letter.

The letters sent by GP practices to make patients aware of their prediabetes risk were all very different and we think more research is needed to work out what type of letter might motivate patients to make lifestyle changes and/or attend a course.

FUNDED BY



This study is funded by the National Institute for Health and Care Research (**The Health and Social Care Delivery Research (HSDR) Programme, 16/48/07 – Evaluating the NHS Diabetes Prevention Programme (NHS DPP): the DIPLOMA research programme (Diabetes Prevention – Long Term Multimethod Assessment)**). The views and opinions are those of the authors and do not necessarily reflect those of the National Institute for Health and Care Research or the Department of Health and Social Care.