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Rising direct medical and non-medical cost and healthcare resource use among diabetes patients: An investigation based on the cost of illness study from Pakistan

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Pakistan is facing a huge health crisis, with rising prevalence of diabetes. The economic cost of disease management is huge and growing. Not only this but health insurance is rarely available and most of the healthcare expenditure is paid for out of pocket. With the growing urbanization and increasing life expectancy, diabetes will pose a much greater burden on society. This was a hospital-based cost of illness study. We conducted a cross-sectional survey of patients with type II diabetes coming to tertiary care hospital. Mean direct cost was Rs.1323.85 (\$106). The mean medication costs and diagnostic tests were Rs.6823.23 (\$64.3) and Rs.808.8 (\$7.6). Medications and travel & food cost had the greatest impact on cost (60 and 22 %). <1% of patients had health insurance. >30% of patients were accompanied by an employed relative. Patients with diagnosed diabetes for >10 years had average costs of Rs.10285.88 (\$97.03) versus Rs.5185.18 (\$48.9) average cost for patients with diagnosed diabetes for <5 years. >30% of participants missed medication, primary care visits, and self-monitoring blood sugar due to financial constraints. 22% patients had missed their work, and 57.5% had to wait for 1 to 2 hours for primary care visits. Our study concluded high direct medical and non-medical cost and healthcare resource use associated with the presence of diabetes in Pakistani adults. We recommend more national-based surveys in order to inform health care providers and policymakers to design healthcare provision to reduce the socioeconomic burden.

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