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ASIA EDITION

Thailand discovers unmet needs in diabetes care

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Better health information systems that allow every Thai to access their personal health information, including diabetes risk and screening records, could contribute to reducing unmet need



A new study by researchers from Boston University School of Public Health (BUSPH) in the US and Chulalongkorn and Mahidol Universities in Bangkok, which was published in the journal PLOS ONE, found that the majority of Thai adults with diabetes were never diagnosed, but that most of those who were diagnosed did receive treatment and got the condition under control.

The study focused on the strengths and weaknesses of diabetes care in Thailand's universal health system, using the 2014 Thai National Health Examination Survey (NHES V), the largest cross-sectional, noninstitutionalized population-representative survey in Thailand, completed every five years.

TOPLINE DATA

Of the 15,663 Thai adults included in the study, 8.8% appeared to have diabetes based on their blood samples and/or reporting being treated for diabetes. Of those who appeared to have diabetes, the researchers found that 67.0% reported ever being screened for diabetes, 34.0% reported being diagnosed, 33.3% had been treated, and 26.0% had their diabetes under control.

KEY FINDINGS

There were several key findings from the report. The researchers identified a significant unmet need for diabetes care in the Thai adult population, with 74% of those with diabetes having an unmet need for care across levels of screening, diagnosis, treatment, or control. Additionally, the high unmet need for diabetes care was found to be largely attributable to loss at the stages of screening and diagnosis, which each contributed 33% to total unmet need.

INSIGHTS & RECOMMENDATIONS

The study highlighted the need for stronger investment to strengthen primary health care in Thailand. An independent assessment after a decade of the Thai Universal Coverage Scheme (UCS) indicated that the focus on curative care may have contributed to lower resources for public health functions. While several national policies to improve diabetes screening and care have been passed, and a dedicated “chronic care fund” was established under UCS to strengthen screening and primary care for diabetes and hypertension in 2011, large gaps remain in disease detection.

Future steps might include expanding primary health care clinics and staff, in addition to auxiliary health providers like community pharmacists, who in prior studies have successfully managed diabetes and hypertension in conjunction with primary care providers.

Better health information systems that allow every Thai to access their personal health information, including diabetes risk and screening records, could also contribute to reducing unmet need.

ON THE RECORD

"Thai healthcare systems may have put emphasis on expanding coverage both in terms of population coverage and medical care benefit packages, which they did quite well with relatively low cost (and limited resources). Nevertheless, this paper highlights the importance of improving the quality of care, especially primary care and public health promotion and disease prevention," said study co-author Dr. Piya Hanvoravongchai, lecturer in the Department of Preventive and Social Medicine in the Faculty of Medicine at Chulalongkorn University in a statement.