Diabetes updates and patient tools

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Know your diabetes guidelines

In April 2013, the Canadian Diabetes Association released the updated Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada.

Diabetes is a significant societal and health issue for Canadians. For this reason, CPhA was actively involved in making pharmacists aware of the previous guidelines in 2009 through a *CPJ* diabetes supplement that specifically focused on guideline aspects relevant to pharmacists in the management and follow-up of patients with this chronic disease.

What's new in the guidelines?

Changes have been made in the following areas of the 2013 diabetes guidelines:

- Diagnosis
- Organization of care
- Glycemic targets
- Self-monitoring of blood glucose
- Nutrition therapy
- Pharmacologic management of type 2 diabetes
- In-hospital management
- Vascular protection
- Chronic kidney disease
- Diabetes and pregnancy
- Diabetes in the elderly

In 2013, CPhA continued this initiative by addressing the guidelines through a number of its media channels, in an effort to ensure that pharmacists have the information they need to expand their role in meeting the needs of their patients with diabetes.

CPhA is hosting a number of diabetes webinars that highlight key areas of the guidelines. These webinars will be prepared and presented by CPhA Diabetes Champions. Further, we are creating **Diabetes Guidelines Highlights** web pages containing essential information for pharmacists from each chapter of the 2013 clinical practice guidelines.

At the time of writing, the pages corresponding to chapters 1 to 26 of the guidelines are live, and we will post subsequent chapter

highlights weekly until all topics and chapters have been covered. These Diabetes Guidelines Highlights web pages will be available within the Diabetes Strategy for Pharmacists area of the CPhA website as well as in the diabetes community of MyCPhA. A number of practice tools are available that support the provision of evidence-based care.

The aim of this initiative is to provide Canadian pharmacists with concise and accessible tools to offer care to patients with diabetes according to the most current practices in the diabetes community. We encourage you to use these materials, and we welcome feedback.

The Diabetes Guidelines Highlights and more can be found at www.pharmacists.ca/diabetes.

Talk to your patients about diabetes in their language

November's National Diabetes Month may be over, but it's always a good time to talk to your patients about diabetes. Our CANRISK resources can help. Available in 13 different languages, CANRISK is a questionnaire that pharmacists can use to help patients identify their risk of prediabetes or type 2 diabetes. It is intended for adults aged 45 to 74 but can also be used for younger groups in high-risk populations. By implementing the CANRISK questionnaire in your community pharmacy, you will play a key role in the prevention and early detection of diabetes.

Developed by the Public Health Agency of Canada (PHAC), CANRISK was adapted from a similar questionnaire used in Finland as part of its national diabetes prevention program (FIND-RISK). PHAC convened a group of clinical and academic experts to modify the questionnaire so it would more accurately reflect known diabetes risk factors applicable to Canadians; this included adding new questions on ethnicity, education and gestational diabetes.

CANRISK scores have been validated against diagnostic gold standard blood tests in a recent Canadian study for use in assessing diabetes risk in Canada's multiethnic population. This peer-reviewed study involved more than 6000 blood-tested adults (*Chronic Diseases and Injuries in Canada*, Dec. 2011).

The Translator: The role of pharmacists in deprescribing

The Translator is a CPhA initiative that supports knowledge translation between pharmacy practice research and health policy. Each issue features a number of pharmacy practice research articles, briefly summarizes them and discusses the health care policy implications. These articles are submitted by researchers who have a strong desire to support evidence-based health care policy and best practices.

Deprescribing, the practice of stopping, reducing or slowly withdrawing medications that are inappropriate, unsafe or ineffective is examined in the next issue of *The Translator*:

- Managing polypharmacy in a 77-year-old woman with multiple prescribers
- Discontinuing benzodiazepine therapy: An interdisciplinary approach at a geriatric day hospital
- Deprescribing medication in very elderly patients with multimorbidity: The view of Dutch GPs
- Incidence and economic burden of adverse drug reactions among elderly patients in Ontario emergency departments

To read more, see www.pharmacists.ca/the-translator. *The Translator* is made possible in part through an unrestricted educational grant from Pfizer.