

Blood Glucose Meters Used For Screening Purposes

Diabetes WA Position Statement:

Screening for diabetes using blood glucose monitoring techniques (i.e. finger pricks)

Our vision is: Freedom from Diabetes and we aim to achieve this vision by creating amongst others; Community freedom from diabetes by providing programs which develop a healthy and informed community thereby reducing the incidence and prevalence of diabetes. This includes risk assessment and management and screening tools.

Diabetes WA does not recommend, advocate or use random blood glucose monitoring (finger pricks) as a screening tool for diabetes. Diabetes WA strongly advocates that blood glucose monitoring as a screening tool is **NOT** used in a community setting.

Rationale:

This position is supported by the Australian Diabetes Educators Association (1), The American Diabetes Association (2) and is consistent with the National Health & Medical Research Council guidelines (3).

Diabetes WA's position has been adopted on the basis of the following:

- Random blood glucose monitoring is **not diagnostic**. Blood glucose monitoring is open to interpretation and if misinterpreted opportunity for appropriate follow up is lost. This is especially so if the misinterpretation is a 'false negative' result. Diagnosis can only be made with a venous sample of blood that is tested in a laboratory
- Results of blood glucose monitoring **are** influenced by a range of variables, including operator competency, type of food eaten previously, stress and importantly clean fingers
- Risk of Needle stick injury and sharps disposal are considered and the prevention of transmission of blood borne infections
- Random blood glucose monitoring as a screening tool is **not cost effective**
- Blood glucose monitoring in the public arena, with results and its implications being discussed, breaches confidentiality

Recommendations:

Diabetes WA acknowledges that while there is no perfect tool for screening for diabetes, it is far more appropriate to screen for risk factors and incorporating risk management advice. Therefore Diabetes WA recommends:

- Promotion of awareness of risk factors and signs and symptoms of diabetes
- Non invasive risk assessment, based on known risk factors (as specified by the NHMRC guidelines (3) through questionnaires such as the **Don't Ignore Diabetes** risk assessment tick tests
- Referral of people with one or more risk factors to their GP for appropriate follow up, including clinical assessment and venous blood sampling as appropriate
- Promoting a healthy lifestyle (maintaining a healthy weight/waist circumference increasing physical activity and healthy eating) that contributes to preventing the preventable risk factors

For further information:

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Reference:

- (1) Australian Diabetes Educators Association (ADEA) Use of BG meters, 2005. Available on ADEA website www.adea.com.au
- (2) American Diabetes Association Position Statement, Screening for Type 2 Diabetes. Diabetes Care **26 (Suppl), S21-S23, Jan 2003**
- (3) NHM&MRC National Evidence Based Guidelines for the Management of Type 2 Diabetes Mellitus: Primary Prevention, Case Detection and Diagnosis December 2001
- (4) Diabetes Australia-Vic position on community-based blood glucose screening, June 2006