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Barriers in health care of patients with diabetes mellitus in Romania

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Background & Aim: In Romania as in Europe too, there is an estimated rising prevalence of diabetes mellitus (DM). Romanian Health Care System requires the diagnosis and therapy to be done by a DM specialist. The family physicians (GPs) can only repeat an established prescription for oral therapy and give new referrals every 6 months for Type 2 diabetes (GPs are not allowed to ask tests like HBA1c and to prescribe insulin). According to International Diabetes Federation (IDF), 7.99% of Romanians are diabetics. There are 386 registered DM specialists (and 334 residents) and 12.655 GPs. The aim is to identify weak points and to increase the quality of diabetic care.

Methods: We analyzed the data published in the 2014 National databases concerning DM health care and International reports and guidelines. We analyzed them according to Romanian regulations.

Results: The reported number of diabetics (20-79 years old) for 2014 differs according to different organizations from 1.530.250 (IDF) to 918.886 (registered in DM specialists practices) and 730.190 (in GPs practices). IDF estimates that almost 43.4% DM patients are not diagnosed. There were 65.179 hospitalized diabetics and 17.285 diabetics who died in 2014. In the rural area, inhabited by 46.1% of Romanians, 37% of GPs are practicing, but no DM specialists. The legislation allows just DM specialists to diagnose and establish a treatment plan for diabetics. **C**

onclusions: There are important differences of registered DM patients in different Romanian databases. Due to these differences, their health care delivery creates inequality. The access of all DM patients to health services is difficult so they are under-diagnosed and under-treated. As a direct consequence there is a high rate morbidity with high costs of care While trained FPs are able to diagnose and treat DM patients, a national consensus is required.