Developing guidelines to manage diabetes during palliative and end of life care: A collaborative iterative approach

**Statement of the Problem:** Diabetes is an underlying cause of death in over 60% of deaths due to diabetes complications and other comorbidities. People with diabetes have a shorter life expectancy than the population. Quality diabetes palliative and end of life care requires a personalized approach and should be a proactive collaborative endeavor. Clinicians are reluctant to discuss these issues with people with diabetes and there is limited guidance to support their decision-making.

**Aim:** The aim is to develop and formatively evaluate guidelines for managing diabetes at the end of life that were evidenced-based, clinically relevant, holistic and usable.

**Method:** The standard guideline development procedures are used. In addition, palliative care clinicians used several successive iterations of the draft guidelines to deliver care. Thus, the guidelines were tested before they were released into the public domain. The interview was done for the people with diabetes receiving palliative care and families about their experiences and the care issues they believed needed to be included in the guidelines.

**Findings:** The literature review identified only five relevant papers, three of which provided advice based the initial paper, none advocated a holistic approach. People with diabetes wanted blood glucose testing and diabetes medicines continued until ‘the end’ as part of symptom control and comfort. Families were concerned about assuming diabetes self-care when their relative was too ill to continue do so. Important aspects of diabetes palliative/end of life care were included in the final guideline that was not mentioned in the literature review. Collaborating with key end users enhanced the likelihood they would be used.

**Conclusion:** The guidelines are clinically relevant and encompass issues relevant to people with diabetes and clinicians. They were developed collaboratively with end users and care recipients, which enhanced their relevance.

**Biography**

Trisha Dunning is the inaugural Chair in Nursing and a Member of the Centre for Quality and Patient Safety Research in the Barwon Health Deakin University Partnership. Her research and care focus are on older people with diabetes and end of life care. She serves on many Professional Committees and Advisory Boards, including Diabetes Victoria, College of Nursing Australia and the International Diabetes Federation. She was made a Member of the Order of Australia in 2004 for her work in nursing and diabetes.