

DM Joint Clinic - Collaboration between Fanling Family Medicine Centre and Diabetes & Endocrine Team of North District Hospital

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Introduction

Early intervention is crucial to achieve optimal therapeutic targets and prevent cardiovascular complications in diabetic patients. For cases showing early deterioration, timely endocrinologist input—rather than prolonged waiting for specialist outpatient clinics—can improve outcomes and cost-effectiveness.

A joint clinic between Family Medicine (FM) and Endocrine Teams serves this purpose by:

- Enhancing **knowledge transfer**,
- Empowering FM colleagues to **manage complex cases**, and
- Facilitating **early referral** for patients requiring specialist care (e.g., those needing intensive insulin therapy).

Methodology

Diabetic patients with **challenging metabolic control** are recruited, including those with:

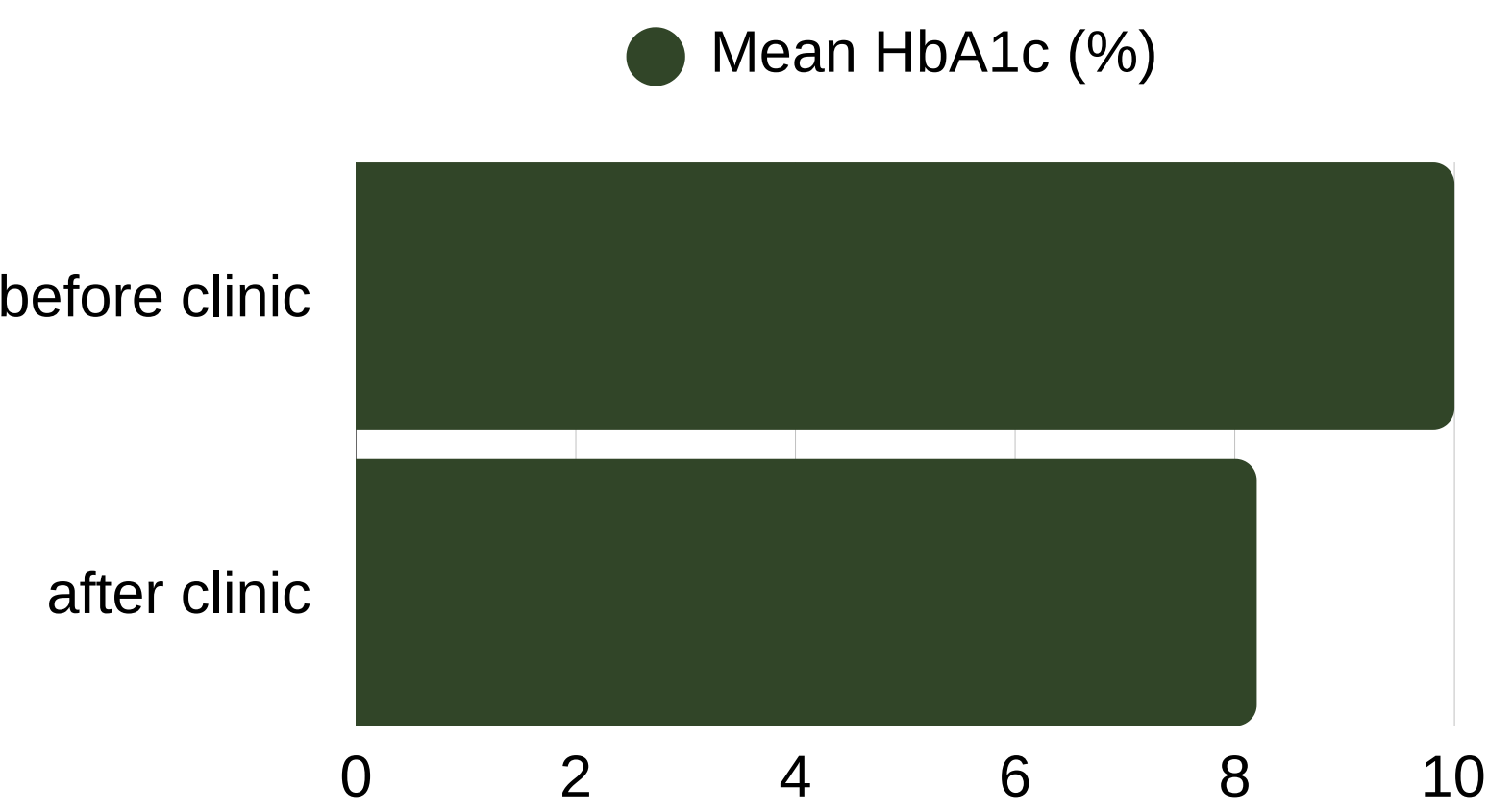
- Suboptimal HbA1c (>7.0%) despite maximal oral hypoglycemic agents,
- Stage 3A/B chronic kidney disease (CKD),
- Significant proteinuria, or
- Frequent hypoglycemia.

The joint clinic is held bimonthly and involves:

- Joint consultations with a Family Medicine specialist, Endocrinologist, and Diabetes Nurse Consultant,
- Use of **Continuous Glucose Monitoring (CGM)** when clinically indicated.



Patients with improved HbA1c (Figure 1)



Results

After 4 sessions, 13 new cases were reviewed:

- 5 patients had **improved HbA1c**, of whom mean HbA1c decreased from 10% to 8.2%. (Figure 1)
- 46% of patients were under 60 years old.
- 30% were discharged after the first visit.
- CGM and nurse counseling **improved insulin therapy acceptance**.
- One patient identified for **GLP-1 agonist** treatment.
- Another patient flagged for **urgent nephrologist referral** due to rapid renal decline.

Conclusion

- The DM Joint Clinic improves disease control for complex diabetic patients in primary care
- It fosters interdisciplinary learning
- It aligns Family Medicine and Endocrine management strategies
- Early results demonstrate its potential to enhance patient outcomes and optimize resource utilization.