

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

Submission Id: 6802

Title

Factors Associated with Annual Vision Screening in Diabetic Adults: Analysis of the 2019 National Health Interview Survey

Priority 1 (Research Category)

Population health and epidemiology

Presenters

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Abstract

Context:

Diabetic retinopathy (DR) is the most common complication of diabetes mellitus and is the leading cause of blindness in working age Americans.

Objective:

Determine the association(s) between receiving an annual eye exam and various economic, social, and geographic factors assessed in the 2019 National Health Interview Survey (NHIS) among adults with diabetes in the continental United States.

Study Design:

Data from adults 18 years of age and older relevant to self-reported non-gestational diabetes diagnosis and eye exam within the last 12 months were extracted from the 2019 NHIS dataset. A multivariate logistic regression model was used to determine associations between receiving an eye exam in the preceding 12 months and various economic, insurance-related, geographic, and social factors. Outcomes were reported as odds ratios (OR) with 95% confidence intervals (CI).

Setting or Dataset:

The 2019 National Health Interview Survey (NHIS) is a large-scale household interview survey coordinated through the National Center of Health Statistics (NCHS) under the auspices of the Centers for Disease Control and Prevention (CDC) and was the source of data for this study.

Population Studied:

The subset of 3355 adults who responded “yes” to the question “Not including (gestational diabetes, prediabetes), has a doctor or other health professional EVER told you that you had diabetes?”

Intervention/Instrument:

No interventions were studied in this observational analysis.

Outcome Measures:

The outcome of interest was receiving an annual eye exam in the preceding 12 months. The factors analyzed for association with guideline-concurrent screening were based on previously reported metrics associated with receiving guideline-concordant annual vision screenings for diabetic adults and the Healthy People 2030 approach to the social determinants of health.

Results:

Female sex, residence in the midwestern United States, use of VA healthcare, having health insurance, and having a usual place to go for healthcare were positively associated with an eye exam in the previous 12 months among adults with diabetes. In contrast, educational attainment less than or equal to high school or GED was associated with a decreased likelihood of receiving an eye exam in the previous 12 months among diabetic adults.

Conclusions:

Economic, social, and geographic factors are associated with diabetic adults receiving an annual eye exam.

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