

Remote digital albuminuria testing in high risk groups: what can we learn and can we make it equitable?

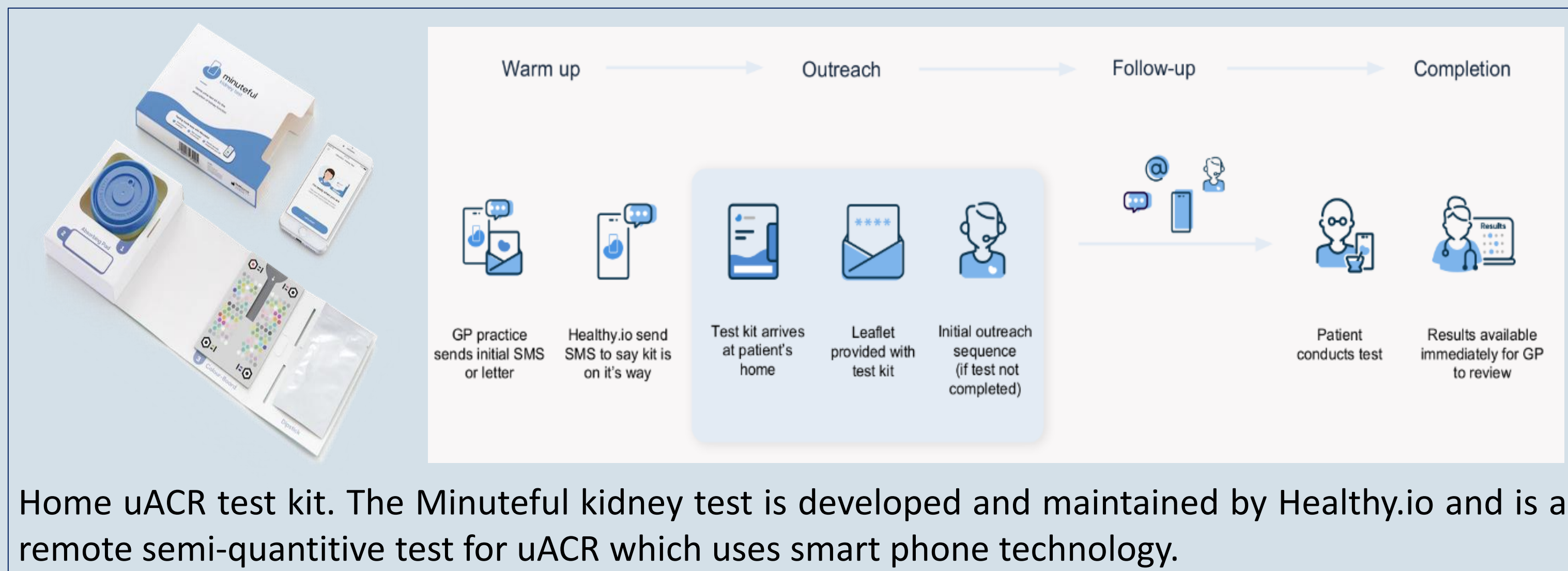
Analyses of a year-long roll out

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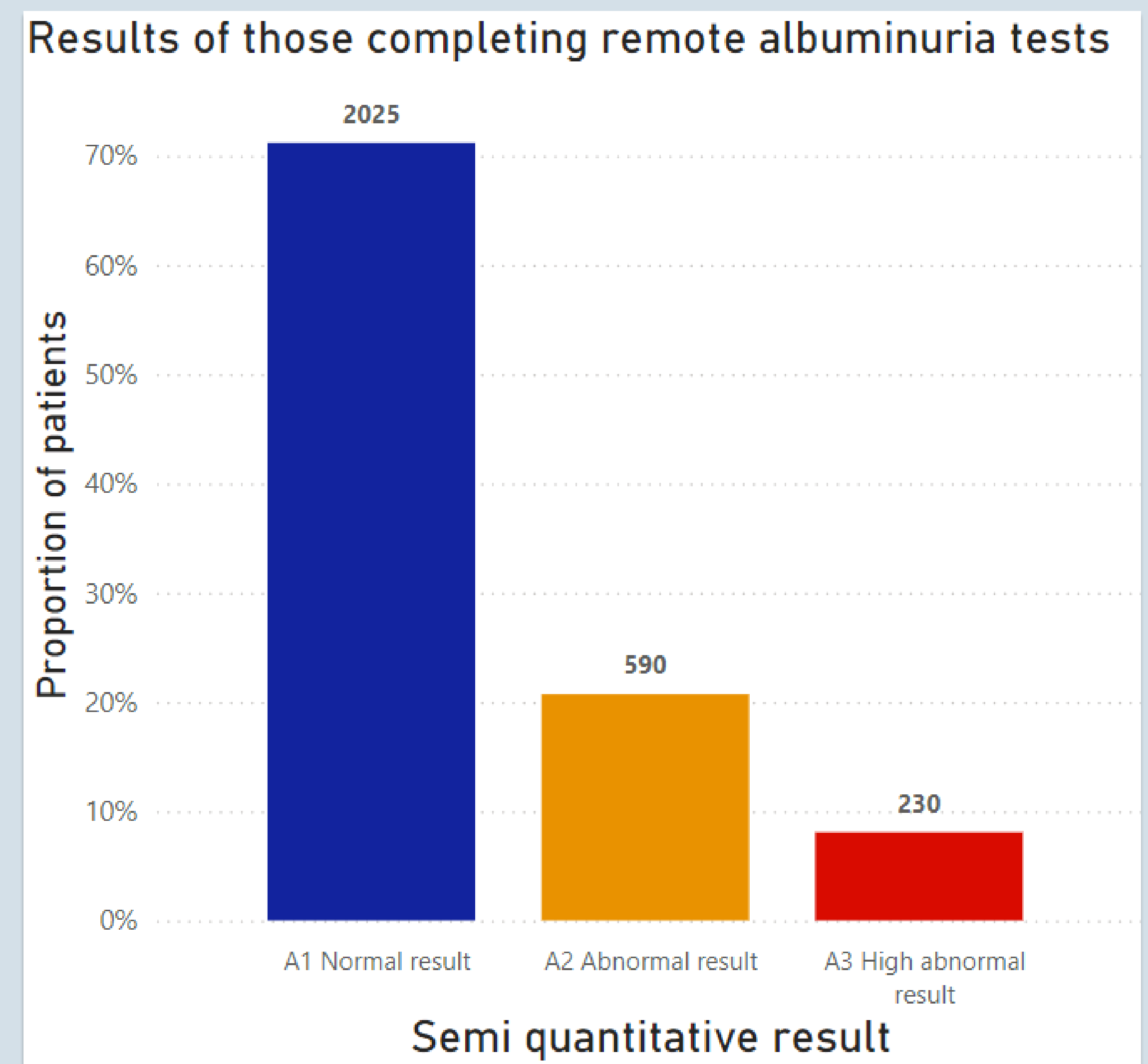
Background

South East London integrated care board (SEL ICB) distributed digital remote albuminuria tests to its population during a year long period 2022 – 2023. The tests were sent to **patients with a diagnosis of diabetes and no albumin creatinine ration (ACR) in the last 12 months** (exceptions included pregnancy, CKD stages 4 or 5, living in a care home and having a long-term catheter).



Results:

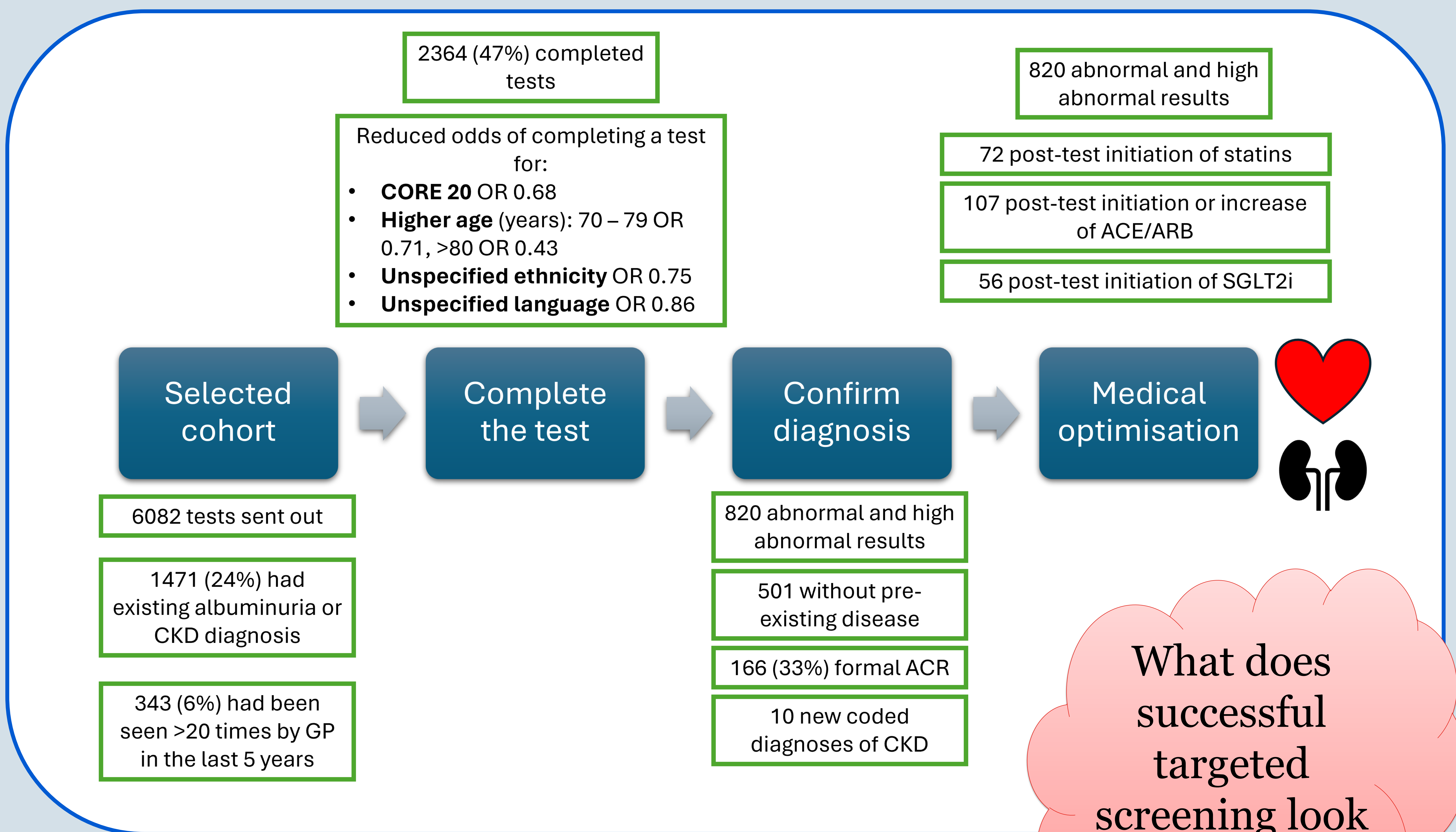
The bar chart and infographic below give an overview of the analyses performed.



Methods for data analysis

Working with the SEL ICB, data protection teams and local public health teams, anonymised data was extracted via an EMIS search across 27 participating practices.

Analyses were performed using StataSE18.



Next steps:

7000 tests available for a new cohort, informed by analyses and stakeholder involvement

1. Consider those with high risk, less contact for opportunistic testing, not in other incentivised pathways
2. Restrict upper age
3. Tailor invitation, explanation and support offered by digital provider for those with lower odds of completing test
4. Support practice teams to be able to systematically respond to a semi-quantitative result