

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
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ANSWER TO BE TABLED ON TUESDAY 2nd JULY 2013**

**Question**

Will the Minister explain the cost implications of caring for patients with diabetic foot ulcerations (including the cost of toe, foot and leg amputations and after care costs)?

What programme, if any, does the Minister intend to put in place to screen the population for diabetes with particular reference to the introduction of preventative medication methods?

**Answer**

The on-going cost for patients with diabetic leg ulcers varies from patient to patient, as it is dependent on the type and frequency of outpatient appointments, dressings applied, and whether the patient requires hospitalisation and, potentially, surgery for the treatment of an infected foot/leg ulcer.

HSSD budgets are allocated at service-level and costs by treatment / condition are not routinely collated.

The department has a number of initiatives in place to encourage lifestyle changes such as losing weight, healthier eating and increasing physical activity. They include:

- **A Breastfeeding initiative**
- **Early years food guidance/training:** Covers basic food hygiene requirements as well as best practice in providing healthier foods suitable for the nutritional requirements of under 5's
- **The Jersey school food standard:** Secondary school canteens monitored in offering healthier foods and drinks with an emphasis on reduced fats and saturated fats, sugar and salt as well as increasing fruits and vegetables
- **Healthy Schools Programme:** Schools work to achieve best practice standard across four areas, in particular food and physical activity
- **Eco-Active schools:** Develops programmes and facilities that encourages, supports and promotes the benefits of walking and cycling to school
- **Strategic Travel plan:** Includes improvements in cycle routes and pedestrian friendly infrastructure, as well as walking and cycling awareness raising events
- **Provision of Health Education materials:** SoJ web basic fact sheet information with links to UK best practice sites
- **The Exercise Referral Scheme**
- A programme of **subsidised attendance at commercial weight-management groups**
- A programme for **bariatric (weight-loss) surgery** in a few carefully selected cases

The expert body that advises on population screening is the UK- based National Screening Committee (NSC). The NSC has considered universal screening for Type 2 Diabetes, but there is

no randomised controlled trial evidence of its effectiveness, and universal population screening for diabetes is not recommended.

The NSC has provided risk management guidance, however, which led to the UK introducing a 'Vascular Risk Management Programme'. This programme involves UK GPs carrying out a regular 'Health Check' to assess an individual's risk of developing diabetes (whilst at the same time also assessing the risk of developing heart or kidney disease or of having a stroke). Individuals who are identified as being at high risk of undiagnosed diabetes are then tested for the condition.

This strategy of 'targeted' testing for undiagnosed Type 2 Diabetes in high risk individuals is the one supported by most diabetes associations and charities worldwide. The UK Department of Health recently completed a roll out of this new 'Health Check' programme.

Introducing a similar, centrally coordinated programme in Jersey, would have obvious cost implications. This is an area for consideration as part of Phase 2 of the White Paper Health Service transformation.