

Experiences and Difficulties Transitioning to Adult Diabetes Clinical Care – A Qualitative Study

Eleanor Lorton¹, Shideh Majidi², and Erin Youngkin²; University of Colorado School of Medicine¹, MD Program, Class of 2023; Barbara Davis Center for Childhood Diabetes²

ABSTRACT:

BACKGROUND & OBJECTIVES: Young adults with type 1 diabetes (T1D) undergoing transfer from pediatric to adult care are at an increased risk of acute and chronic health complications due to challenges associated with transitioning healthcare. This study aims to highlight patient-focused areas of improvement that could be used to optimize transition of care.

METHODS: Thirteen (n = 13) patients with T1D between ages 17-25 who had completed a pediatric transfer visit and had an adult diabetes appointment scheduled or completed were randomly selected to complete a telephone questionnaire that included open-ended questions regarding experiences transitioning to adult diabetes care. Interviews were analyzed for themes.

RESULTS: Thirteen young adults with T1D ($M_{\text{age}} 23.1 \pm 1.5$ years; $M_{\text{duration}} 13.0 \pm 5.4$ years; 46% female; 69% private insurance; 69% Caucasian, 23% Hispanic, 8% "Other") completed the interview. Two primary themes emerged regarding "the easiest part of transfer": streamlined process (66.7%) and clinic familiarity (20%). Three themes related to transition challenges were: lack of guidance (25%), difficulty changing providers (18.8%), and patient-provider compatibility (12.5%). In those who suggested areas of improvement, two main themes emerged: distance to clinic (20%) and scheduling (13.3%). Patients described two support systems themes (family – 68.8%, significant other – 25%) and three themes of support type (diabetes-care – 35%, financial – 30%, and emotional – 25%).

CONCLUSIONS: The majority of patients highlighted that a streamlined process and previous familiarity with the clinic made transferring care easier, while provider compatibility and lack of guidance in the transfer process were barriers. Patients also described a need for improved healthcare access after transition, including more varied clinic locations and appointment options. Young adults also highlighted the continued need for financial, emotional, and diabetes-care support as they transition care. These patient-reported areas of improvement are valuable considerations for creating a patient-centered and effective transition program.