Implementing intensive control of blood glucose concentration and blood pressure in type 2 diabetes in England: cost analysis (UKPDS 63).

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BMJ. 2002 Oct 19; 325(7369): 860.

OBJECTIVE: To estimate the incremental cost of implementing policies for intensive control of blood glucose concentration and blood pressure for all patients with type 2 diabetes in England. DESIGN: Extrapolation of resource use and cost data derived from a randomised controlled trial. SETTING: General practice, outpatient care, and inpatient care. POPULATION: Trial population with diagnosed type 2 diabetes in England extrapolated to the population of England. MAIN OUTCOME MEASURES: Total costs based on use of healthcare resources including costs of management, treatment, and hospitalisation. RESULTS: The incremental net annual cost of implementing intensive control of blood glucose and blood pressure to all people with diagnosed type 2 diabetes in England is estimated to be pound 100.5m (\$156m; euro;159m), which is equivalent to less than 1% of the proposed additional annual expenditure on the NHS in 2001–5. This estimate varied in sensitivity analyses from pound 67m to pound 121m. CONCLUSIONS: Policies to improve control of blood glucose and blood pressure of people with type 2 diabetes are effective in reducing complications associated with the disease and are also cost effective. The total cost represents a small fraction of the NHS's spending plans.