

Health Literacy Module On Diabetic Patients: Is It Cost-Effective?

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ABSTRACT

INTRODUCTION: Economic burden of diabetes was expected to continue to grow. A study had shown that up to 73% of diabetes-related healthcare costs result from hospitalization and ambulatory care, as a result of complications due to poor blood sugar control. Analysis has shown that improved glycemic control would be likely to bring substantial clinical and economic benefits to the patients, arising primarily from the reduced incidence of diabetes complications. 1% reduction in HbA1c was associated with reduced costs of treating diabetes complications and an increase in life expectancy. Health literacy module is one type of diabetic education approach which integrates self-efficacy and self-care behaviour into the module. The aim of the module was to reduce the HbA1c by giving knowledge on how to manage their own diabetes. **METHODS:** Study was done at a tertiary hospital in the Malaysian Armed Forces (MAF). The study design was a cost-effectiveness analysis where the cost-effectiveness ratio (CER) and incremental cost-effectiveness ratio (ICER) were calculated. The costs per unit of reducing HbA1c (%) was evaluated in both intervention and control groups. **RESULTS:** Total cost at final cost centre for the intervention group was RM68,113 while the total cost at final cost centre for the control group was RM67,206. The intervention was cost-effective with CER of 0.12 and ICER of RM 1,225 per HbA1c improvement. **DISCUSSION:** Therefore, health literacy module was cost-effective in reducing HbA1c among type 2 diabetic patients at MAF Tertiary Hospital.

KEYWORDS: cost-effectiveness, HbA1c, diabetes, health literacy, MAF Hospital

High and Rising Healthcare Costs: What Can Malaysia Learn?

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ABSTRACT

INTRODUCTION: Escalating healthcare costs has always been a concern to all health systems globally including Malaysia. Rising healthcare costs will have significant effects on Malaysian households, businesses, and governments and will eventually reduce healthcare affordability. This study aimed to explore the factors, cost drivers and possible strategies to control healthcare inflation. **METHODS:** Using a systematic review approach, extensive electronic and manual citation searches were performed to identify relevant studies. Four keywords were used to develop screening questions which were Inflation, Healthcare, Factors, and Strategies. Screening, data extraction, and quality assessment were undertaken by two reviewers at a time. Inclusion criteria consisted of studies from the year 2000 till 2018, while non-English, editorials, newspapers and non-retrievable articles were excluded. **RESULTS:** From a total of 1070 articles, 22 were included in the full review. Three main factors were identified to be associated with healthcare inflation. All these factors were related to either the healthcare market, health provider, or patient. Among these factors, medical technology advancement, aging population, and declining health status were repeatedly mentioned. Apart from that, a lack of enforcement in price regulation and payment system, increasing demand, and ineffective services were the main contributing factors. Various strategies such as strategic purchasing, effective legislation and enhancing cost-effectiveness services were implemented to control healthcare inflation. **DISCUSSION:** A country like Malaysia can learn from other countries' experiences to control inflation in healthcare. Effective policies, robust implementation and close monitoring on the factors and strategies are the important mechanisms to control inflation in healthcare.

KEYWORDS: healthcare costs, healthcare inflation, factors influencing, strategies to control, curbing inflation