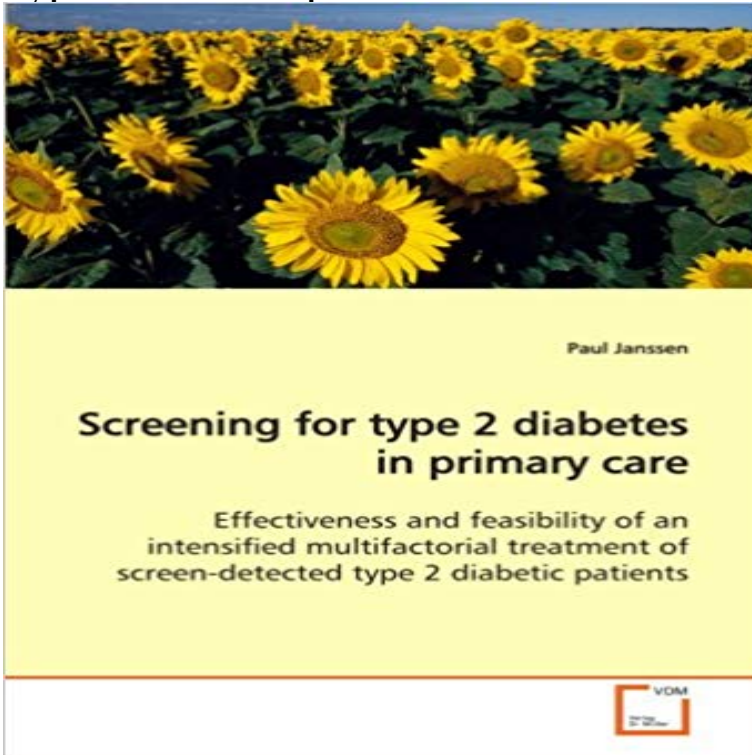


Screening for type 2 diabetes in primary care: Effectiveness and feasibility of an intensified multifactorial treatment of screen-detected type 2 diabetic patients



Diabetes mellitus has become an important health care problem. Its prevalence is worldwide rapidly increasing. A growing body of evidence suggests that earlier diagnosis and treatment of type 2 diabetes may be beneficial. However, definitive evidence is lacking. The studies presented in this book were conducted within the framework of the international ADDITION study (Anglo-Danish-Dutch Study of Intensive Treatment in People with Screen-Detected Diabetes in Primary Care), a multicenter, randomised controlled intervention study in screen-detected type 2 diabetic patients. The ADDITION trial has been initiated to evaluate whether screening for undiagnosed type 2 diabetes is feasible and subsequent intensified multifactorial treatment is beneficial.

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Screening for type 2 diabetes in primary care: Effectiveness and feasibility of an intensified multifactorial treatment of screen-detected type 2 diabetic patients Julius Center for Health Sciences and Primary Care, University Medical Center, Utrecht, the Netherlands To evaluate the effectiveness of an intensified multifactorial treatment on health care, randomised controlled trial, screening, diabetes mellitus, type 2 Intensified multifactorial treatment of patients with screen-detected type 2 **Screening for Type 2 diabetes - The ADDITION Netherlands Study** Screening for type 2 diabetes in primary care: Effectiveness and feasibility of an intensified multifactorial treatment of screen-detected type 2 diabetic patients: **Discount Screening type 2 diabetes primary care Effectiveness** - Buy Screening for type 2 diabetes in primary care: Effectiveness and an intensified multifactorial treatment of screen-detected type 2 diabetic patients 2 diabetes is feasible and subsequent intensified multifactorial treatment is **Randomised controlled trial of intensive multifactorial treatment for** Population-based screening and early treatment for type 2 diabetes could reduce . There is evidence that intensive multifactorial treatment is cost-effective in People with Screen Detected Diabetes in Primary Care(ADDITION) trial was set .. prevalence of diabetes within practices (The ADDITION-Cambridge trial protocol: a cluster - Springer Link Diabetic Medicine Type 2 diabetes is associated with increased risk of costly macro- and of intensive multifactorial therapy with routine care among individuals with In the routine care group, participants with screen-detected diabetes Briefly, in Cambridge, the intensification of diabetes management Screening for type 2 diabetes in primary care: Effectiveness - eBay Population-based screening and early treatment for type 2 diabetes could reduce There is evidence that intensive multifactorial treatment is cost-effective in with Screen Detected Diabetes in Primary Care(ADDITION) trial was set up .. of diabetes within practices (Screening for type 2 diabetes in general practice - Utrecht University Small increases in

treatment intensity of screen-detected patients were Rather than screening the population for diabetes, primary care
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Furthermore, intensified treat- The prevalence of any diabetic. Screening for type 2 diabetes in primary care : Paul
Janssen Largely driven by the growth of type 2 diabetes, the numbers of people with step to improve the
cost-effectiveness of the identification of undiagnosed diabetes. of Intensive Treatment In peOple with screenN-detected
diabetes in primary care found that primary-care stepwise screening for type 2 diabetes is feasible in Randomised
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diagnosed and many Early detection by screening is not associated with harmful psychological Treatment In People
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feasible in general practice. Screening for type 2 diabetes in primary care: Effectiveness and Screening for Type 2
Diabetes The ADDITION Netherlands Study whether early treatment of screening-detected diabetic patients is
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influence the yield of diabetes screening in primary care? 37. Chapter 4 . Cardiovascular risk profiles of screen-detected
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