



The Effects of Reminder & Information Letters on Non-Attendance Rates



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INTRODUCTION

Sight-threatening diabetic retinopathy may be asymptomatic. **Pregnancy is known to accelerate diabetic retinopathy (DR).**¹ Regular attendance to a DR screening programme (DRS) during pregnancy is essential to detect and manage retinal pathology.¹ This audit aims to review whether sending a reminder and information letter to pregnant women due to attend DRS has **any impact on nonattendance rates.**

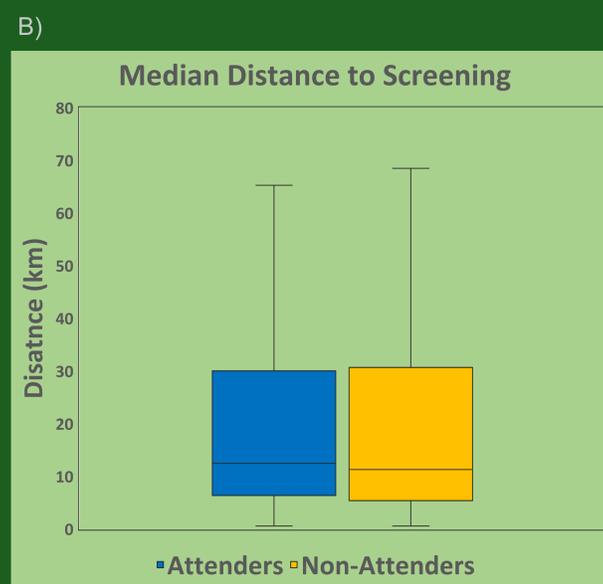
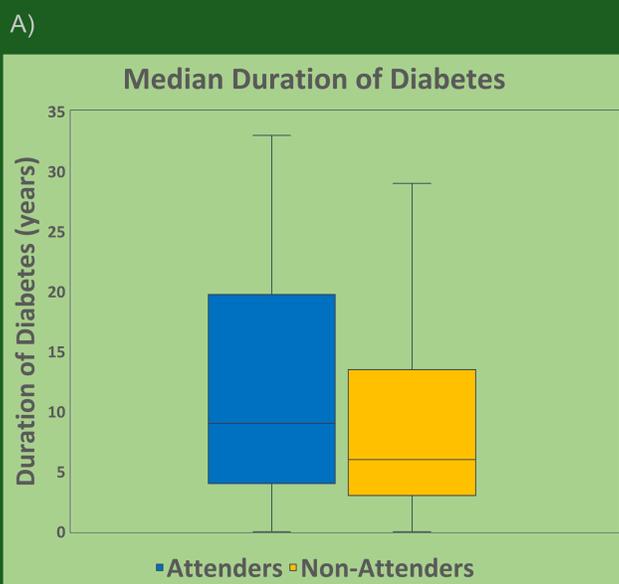
WHAT IS THE DIABETIC RETINA SCREEN?

Screening for diabetic retinopathy is acknowledged as an important aspect of diabetes management.¹ The progression of retinopathy occurs at twice the rate in pregnant women than non-pregnant women.¹ The DRS for pregnant patients is based in the Mater Hospital and receives referrals from all three maternity hospitals in Dublin. The **service screens for the presence and progression of diabetic retinopathy in pregnant women,** offering them an appointment once every trimester. If there are any abnormalities detected during the pregnancy, women are invited back once post-partum. This service has a **high non-attendance rate.**

OUR INTERVENTION

One week prior to their attendance, we sent patients **reminder and information letters** about their appointment. This letter was written in accordance with the **Plain English Campaign** to ensure widespread **inclusion** across **patient education** levels.² The information letter described **what to expect** during the appointment and advised patients of what **precautions** to take **prior and post** their screening.

Sending out reminder and information letters statistically reduced non-attendance rates at a diabetic retinopathy screening service for pregnant patients.



C)

Diabetic Retinopathy Screening Clinic for Pregnant Patients
Mater Misericordiae University Hospital

We are inviting you to have a test to check if diabetes is damaging your sight. Pregnant women with diabetes have a higher chance of having problems with their eyes.

- We will put drops in your eyes to make your pupils bigger.
- You will have to wait 20 minutes for the eye drops to work. They might sting your eyes and blur your sight. This is temporary.
- At the test, the screener will use a special camera to take a photo of the back of your eyes. This doesn't hurt and the camera won't touch your eyes.
- You need to keep your head still when the photograph is taken.
- The eye drops might make things look very bright. It is a good idea to bring sunglasses.
- The eye drops might take up to 9 hours to wear off. You cannot drive until the eye drops have worn off.

A) Median Duration of Diabetes (IQR): Attenders- 10 (4, 20), Non-Attenders- 6 (3, 13.5). P = 0.02
 B) Median Distance to Screening Centre (IQR): Attenders- 14.1 (8.6, 38.9), Non-Attenders- 11.3 (5.4, 30.7). P = 0.87
 C) Information leaflet sent to patients.

METHODS

This was a **retrospective comparative** analysis of pregnant patients who missed at **least one DRS appointments (non-attenders)**. The groups were divided into those who **did not receive** a reminder or information **letter** between April and August **2019**, and those who **received a letter** one week prior to their appointment in the same time frame for **2022**. A subset of this patient cohort was defined as **never-attenders**.

After gathering data on the **characteristics** of the patients, we performed **statistical analyses** on all groups to assess for differences.

RESULTS

In **2019**, 58 out of 127 patients (**46%**) **did not attend** their scheduled appointments. Following the introduction of a **reminder and information letter** in **2022**, 15 out of 57 patients did not attend (**26%**). This finding achieved statistical significance (**p=0.04**).

The mean age for both groups was **34 years**, and the social classes were **marginally above average**.

Non-attenders had a statistically significant **lower median diabetes duration** – those who had diabetes for longer were less likely to miss appointments. There was no significant difference in types of diabetes or distance to the screening centre.

Reminder and information letters **did not show** any statistically significant **impact on reducing** the rate of **never attendance**.

CONCLUSION

The **positive impact** of both patient education and reminding our patients of their appointments is **clearly demonstrated** in this audit. Improved attendance rates benefit our patients' ocular health and allow for better allocation of healthcare resources. We also identified a subset of patients who did not attend DRS, further analysis of this group is warranted to **identify potential barriers to patient engagement** with DRS.

The **administrative constraints** involved in implementing an intervention like this was also highlighted during this audit. The screening service simply **lacked the staff and resources** needed to **send these letters** to every patient due to attend.

REFERENCES & SUPPLEMENTARY MATERIAL

