

Diabetes-related educational resources in four European countries

bank, online lectures, and interactive exercises) have been developed in English and translated into partners' national languages (Estonian, Finnish and Lithuanian) to maximise accessibility for professionals in all partner countries. This will help to develop new innovative learning settings by using modern working tools, patient education and counselling methods, according to the patterns provided by authentic learning.

Conclusions

Patient education and counselling are integral parts of diabetes prevention and care. Individuals living with diabetes, health care providers and the community at large would benefit from provision of education in order to improve the quality of care and management. The development of programmes for continuing education is important for nurses, and the use of internetbased programmes will provide students with opportunities for knowledge exchange between novices and experts.¹ Teachers in partner institutions will continue to collaborate and the content of courses will be discussed and updated annually. The DIPRA programme will be disseminated at regional, national and international levels, and the aim is to include it as a part of the continuation/specialisation studies in all partner organisations and in other Erasmus universities.

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Conflicts of interest

There are no conflicts of interest.

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Book Review

HbA_{1c} in Diabetes, case studies using IFCC units

Stephen Gough, Susan Manley and Irene Stratton

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This book is a useful resource for those involved in diabetes care and can be used to facilitate the transition in HbA_{1c} units from DCCT percentage to IFCC units now reported in mmol/mol. The book begins with a brief introduction to diabetes and HbA_{1c} including situations where use of HbA_{1c} is not considered appropriate and details of abnormal haemoglobins included. The authors use 'thermometers' to provide a visual scale of both HbA_{1c} percentages and IFCC units and these can also be used to visualise individuals' risk of the various complications of diabetes. The levels of HbA_{1c} which could be expected are discussed along with the reasons for needing a reference method of HbA_{1c} and the methods used to measure HbA_{1c}.

Most of the book is made up of case studies contributed by health care professionals. These are somewhat 'addictive' but also easy to dip into and revisit as necessary. The cases involve a range of patients and cover a variety of conditions plus treatment plans and follow up. Target levels of HbA_{1c} are highlighted in IFCC units which increases the reader's familiarity as they progress through the book. Many of the cases discuss complex issues and indicate the difficult decisions involved in diabetes management. One case discusses balancing the fear of hypogly-caemia with optimal control in pregnancy, detailing results of HbA_{1c} on 19 occasions, the challenges in this case are clearly presented but interestingly the possible benefits of measuring fructosamine, as opposed to HbA_{1c} during pregnancy are not discussed.

These case studies will be of interest to all those involved in the clinical care of diabetes and although the treatment regimens/decisions made may spark questions about the individual cases, the repeated use of HbA_{1c} levels throughout the scenario is a useful means of increasing awareness and familiarity with the new IFCC units.

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