



# ADSS

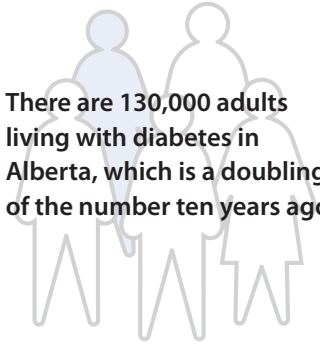
Alberta Diabetes  
Surveillance System

## What is the ADSS?

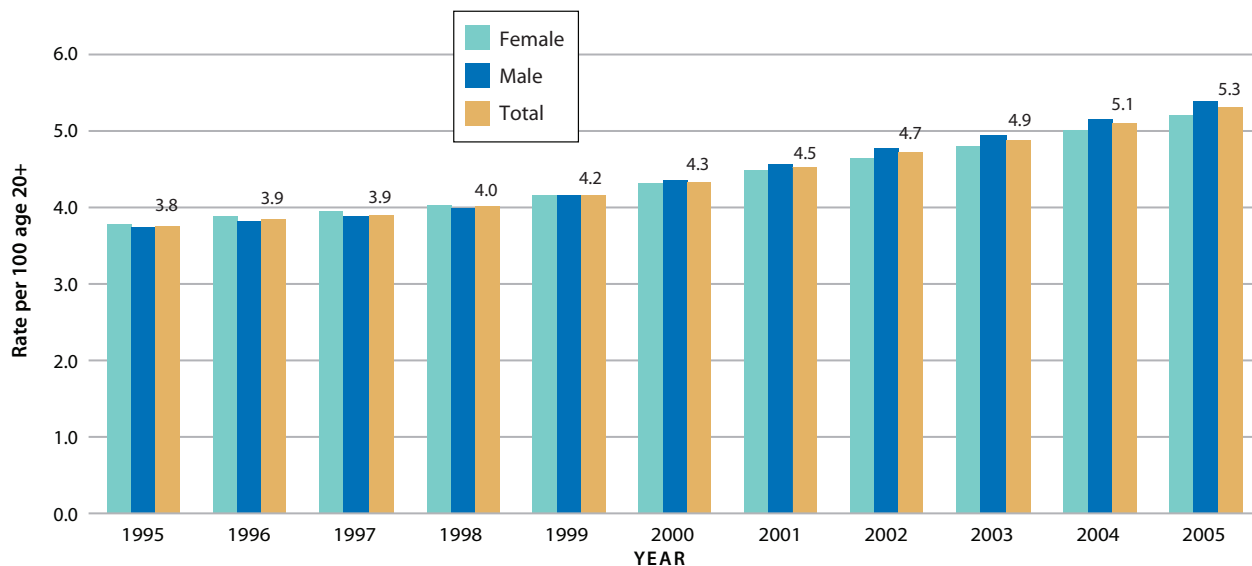
The ADSS is the first coordinated provincial surveillance system of its kind in Canada. A comprehensive diabetes surveillance system was identified as one of the key measures of success for the Alberta Diabetes Strategy 2003-2013, announced by the provincial government in May 2003. The ADSS was established through a partnership between the Alliance for Canadian Health Outcomes Research in Diabetes (ACHORD) Group at the Institute of Health Economics (IHE) and Alberta Health and Wellness

(AHW). Dr. Jeffrey Johnson, Professor and Canada Research Chair in Diabetes Health Outcomes in the School of Public Health at the University of Alberta and Fellow with the Institute of Health Economics is leading the ADSS.  
*(continued on page 2)*

There are 130,000 adults living with diabetes in Alberta, which is a doubling of the number ten years ago.

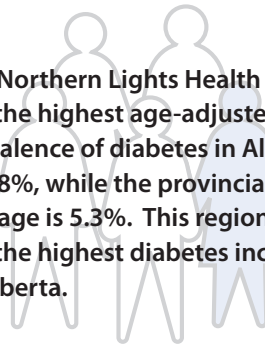


Age-Adjusted Diabetes Prevalence – Alberta - 1995 to 2005



Over the last ten years, we see a steady increase of prevalent diabetes cases with the rate increasing from 3.8% in 1995 to 5.3% in 2005.

**The Northern Lights Health Region has the highest age-adjusted prevalence of diabetes in Alberta at 6.8%, while the provincial average is 5.3%. This region also has the highest diabetes incidence in Alberta.**



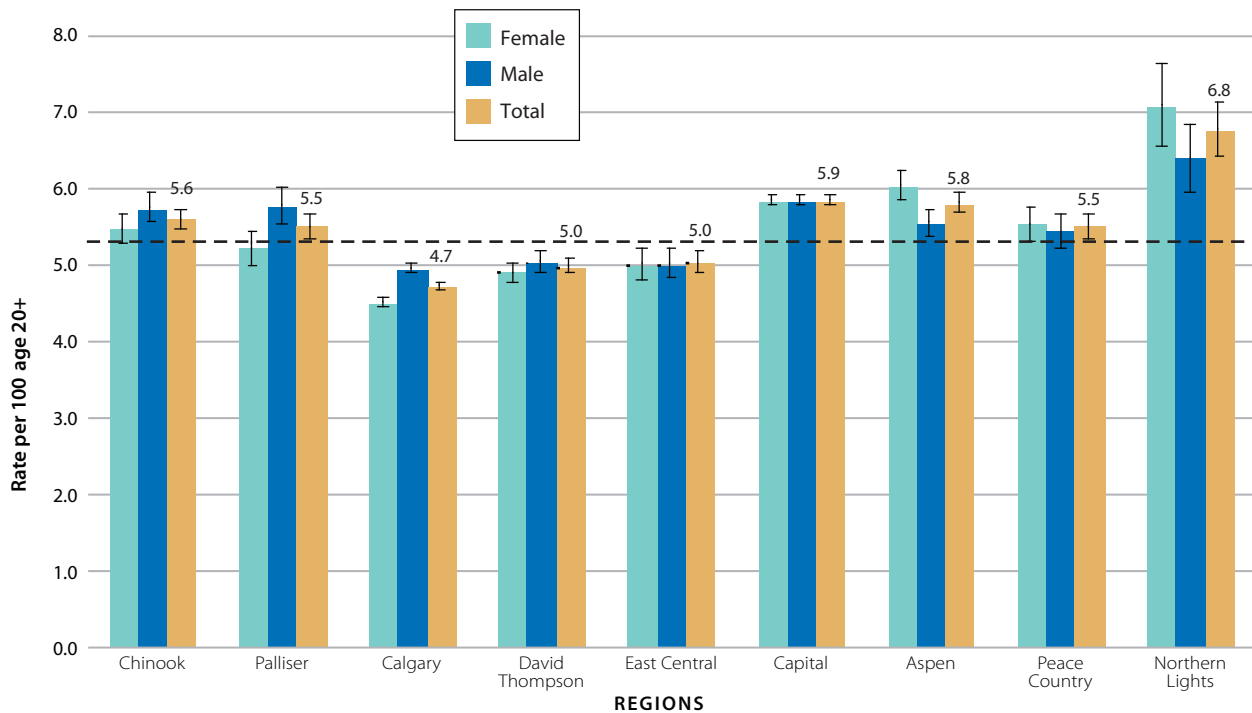
**What is the ADSS?** *(continued)*

The ADSS is based largely on the NDSS (National Diabetes Surveillance System), which is part of the Canadian Diabetes Strategy. The function of the NDSS is to collect and disseminate critical information on diabetes in Canada by facilitating and coordinating the surveillance of diabetes nation-wide in each province and territory. Alberta has been an integral part in the development of the NDSS.

Alberta, like other provinces and territories in Canada, is aiming to improve the overall quality of care for people with diabetes. The province or the regions can implement strategies to improve care, but we will only know if this happens by measuring changes in health care and long-term outcomes. The ADSS provides a systematic measurement tool to evaluate the effect of those intervention strategies.

The ADSS will produce an Alberta Diabetes Atlas to provide a snapshot of diabetes information across the province, by health region. The Atlas will focus on the incidence, prevalence and mortality of people with diabetes, and patterns of health care usage in the different health regions of Alberta. Patterns of different comorbid conditions in people who have diabetes will be reported in separate chapters. This Atlas will be produced every two years, beginning in 2007. An interactive website is also being established that will contain up to date diabetes data.

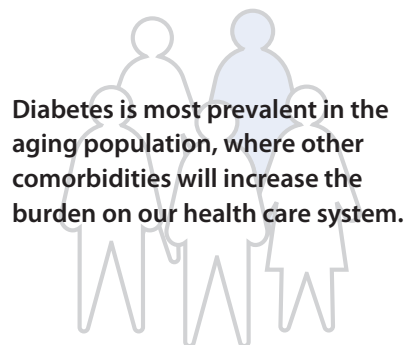
**Age-Adjusted Diabetes Prevalence by Region, 2005**



There are regional differences in the prevalence of diabetes across Alberta's nine regional health authorities. The highest rates appear in the northern and southern regions of the province. For a point of reference, the provincial average was 5.3% in 2005 (indicated by the dotted line).

### How does the ADSS track those who have diabetes?

Through our universal health care system, data is collected for billing purposes between AHW and physicians and hospitals. This is the existing data; but it is not easily translated in a way that health regions and health professionals can understand in terms of policy development and service delivery planning. The ADSS is the dissemination system for information contained in the existing data. In order to accurately identify individuals who have diabetes, the ADSS will use the current NDSS case definition that has been validated in individuals aged 20 years and over. The algorithm identifies individuals with diabetes if they have had one hospitalization with a discharge diagnosis of ICD-9 code of 250 (diabetes mellitus), selected from the first 3 diagnostic fields in the hospital files or two medical claims on different days with an ICD-9 code of 250 within 2 years.



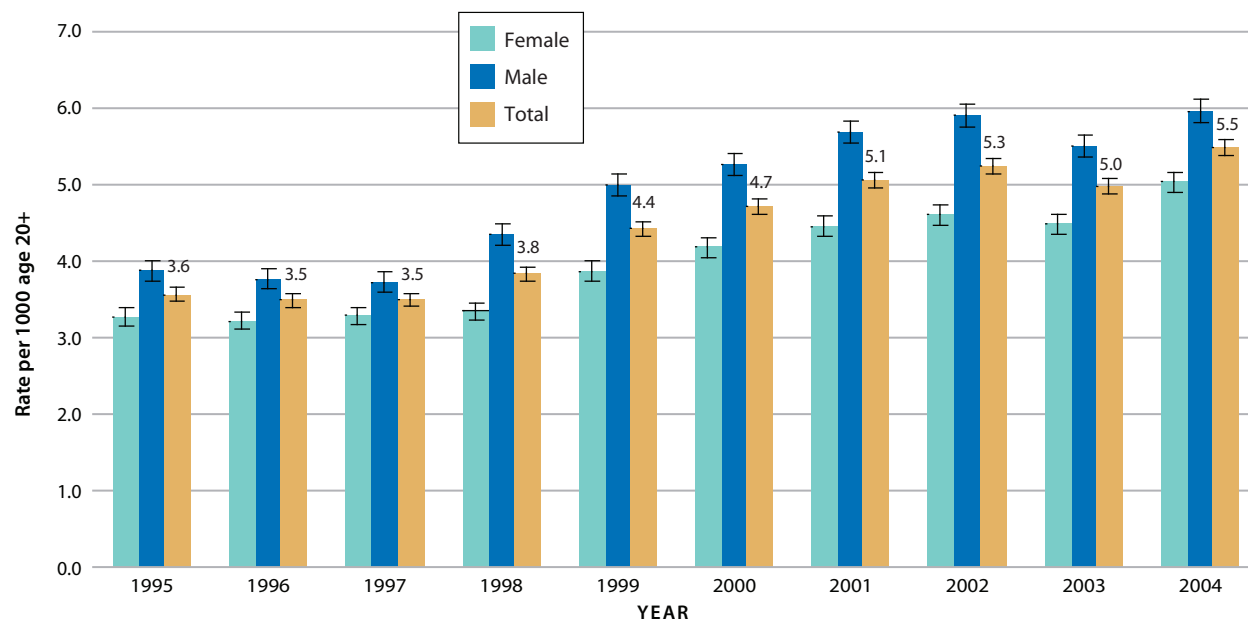
Diabetes is most prevalent in the aging population, where other comorbidities will increase the burden on our health care system.

### Who is involved?

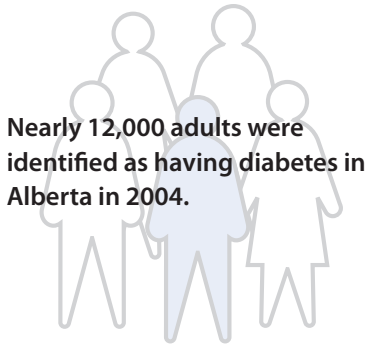
The ADSS is essentially a public health service provided by ACHORD/ IHE to AHW. There is a Steering Committee (see page 4) whose primary mandate is to provide advice and direction on the implementation and evaluation of the ADSS Program.

Working Groups (see page 4) are also involved and consist of clinicians and researchers. They were formed to ensure a high quality of deliverables, with appropriate interpretation of the observed trends and variations. The Working Groups also serve as authors for the various chapters in the Alberta Diabetes Atlas.

### Age-Adjusted Diabetes Incidence – Alberta - 1995 to 2004



New cases of diabetes are also on the rise in Alberta. Males are diagnosed with diabetes at a higher rate than females throughout the years. Rates for both males and females have increased over the last ten years.



Nearly 12,000 adults were identified as having diabetes in Alberta in 2004.



Funding Provided By:



### ADSS Working Group Members

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### ADSS Steering Committee Members

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