

From Paediatric to Adult care

Young adults with type 1 diabetes and their experiences with the transition.

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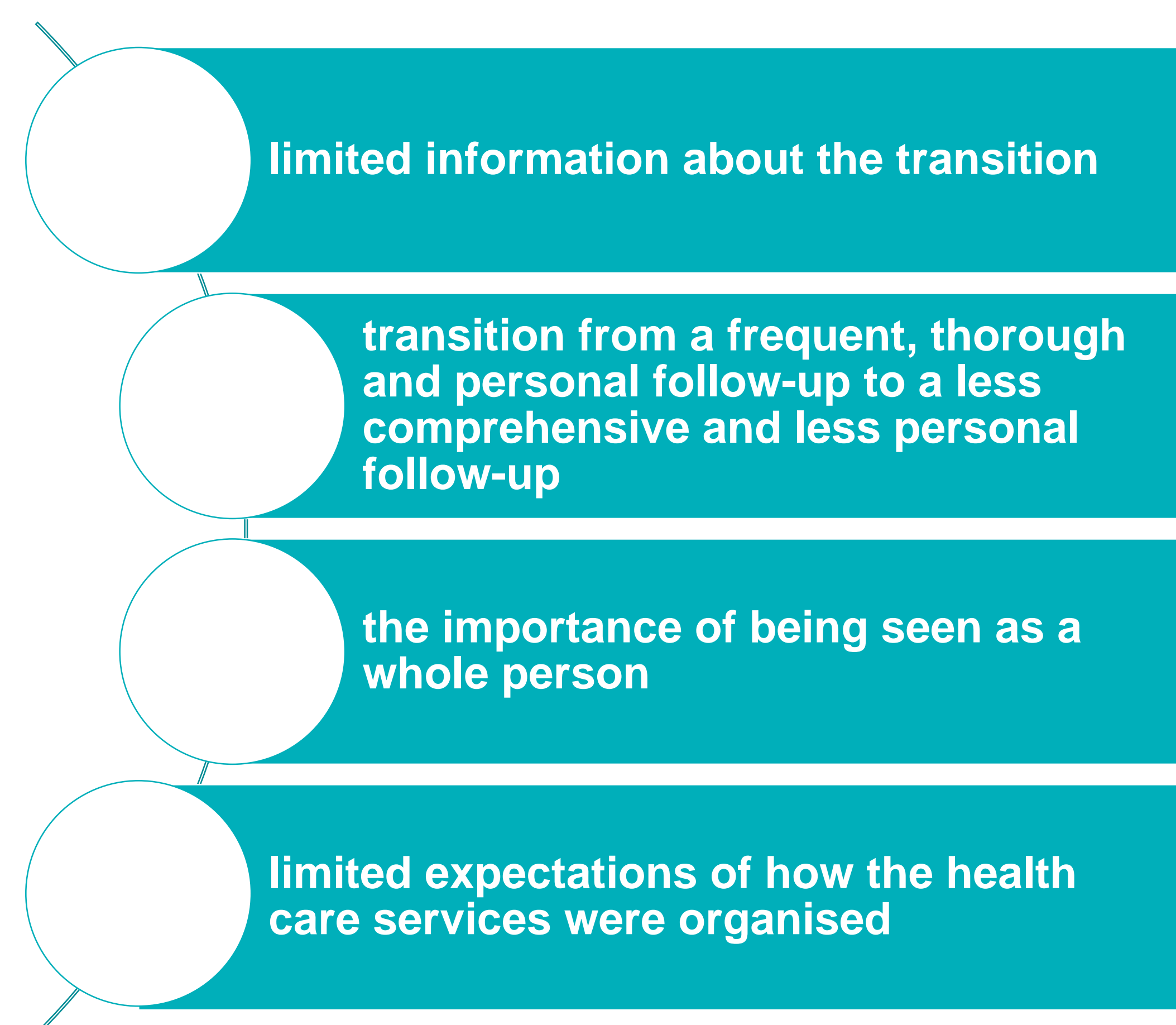
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Background: Living with type 1 diabetes (T1D) is demanding, especially during adolescence and young adulthood with its many rapid physical, cognitive and social changes. During this period, the transition from paediatric to adult diabetes follow-up, also take place.

Aim: To explore how young adults with T1D experienced the transition from paediatric to adult diabetes care services.

Methods: We used an applied inductive approach known as Interpretive Description (ID), in order to design the study and collect and analyse the data. ID is inspired by grounded theory, ethnography and phenomenology, and is specifically designed to explore phenomena in clinical practice aiming to generate new knowledge and skills. Data was gathered by interviewing 11 young adults with T1D (aged 19-23 years) receiving adult care at Haukeland university hospital.

Findings: We identified four main themes regarding the young adults' experiences of the transfer from paediatric to adult diabetes care:



“Yes, because I feel like the doctor is just measuring you, and then you leave again. However, the disease is about so much more than taking insulin. The disease affects you mentally. Therefore, I think the focus on how you are really doing is less evident in the adult outpatient clinic.”

“I thought it was tougher to be a diabetic when I was about 18-20 years old compared with earlier, and handling the disease at the same time when I was new at the adult outpatient clinic was hard. I would have preferred to continue at the paediatric outpatient clinic.”

Conclusions: Existing routines for transfer between paediatric and adult care are not optimal. The participants were not prepared for the dissimilarities in follow-up and were predominantly less pleased with the adult care. The findings indicate a need for structured transition programmes. Young peoples' individual needs for the transition and the follow-up in adult care may be promoted by person-centred care.

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