## What works to increase attendance for diabetic retinopathy screening? An evidence synthesis and economic analysis

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# **Plain English summary**

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People with diabetes mellitus may lose vision as a result of the damaging effects of the disease on small blood vessels at the back of the eye (diabetic retinopathy). Screening for diabetic retinopathy to detect and treat early signs can prevent sight loss. However, screening attendance is variable and sight-threatening changes may not be detected in good time.

This study investigated the literature to find out if interventions used to improve screening attendance are effective. We labelled each intervention in terms of the techniques used to encourage attendance and assessed whether some worked better than others. We then described what factors encourage or prevent patients from regularly attending for screening and examined whether or not the techniques used target these factors. We also assessed value for money by comparing the costs and benefits of the interventions and their component techniques.

We found that interventions aimed at patients and/or health-care professionals were effective at improving screening attendance. Interventions aimed at improving the general quality of diabetes care worked as well as those specifically aimed at improving screening for retinopathy. On average, attendance increased by 12% compared with no intervention. All of the techniques commonly used improved attendance, especially goal-setting and providing additional social support. The successful techniques were highly likely to be good value for money, particularly if used in groups who do not usually attend for screening. Linking techniques to factors influencing attendance showed that the interventions did include techniques that target these factors. However, techniques addressing emotional barriers to screening attendance and fear of the consequences of screening were not included in published interventions.

Evidence shows that interventions that target behaviour change do increase screening attendance and have a good chance of being good value for money. Further studies are required to test how well techniques addressing emotional barriers to screening work in terms of increasing attendance.

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