



Resource impact statement (diabetes type 1 and type 2 in children and young people and periodontal disease)

Resource impact

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No significant resource impact is anticipated

The NICE guideline on diabetes (type 1 and type 2) in children and young people: diagnosis and management updates and replaces the original guideline published in 2015.

We do not expect this update to have a significant impact on resources; that is:

- the resource impact of implementing any single guideline recommendation in England will be less than £1 million per year (or approximately £1,800 per 100,000 population, based on a population for England of 56.3 million) **and**
- the resource impact of implementing the whole guideline in England will be less than £5 million per year (or approximately £9,000 per 100,000 population, based on a population for England of 56.3 million).

Where clinical practice changes as a result of this update to the previous NICE guideline, there is not anticipated to be a significant change in resource use.

The updated guideline provides recommendations for routinely discussing the risk of periodontitis at the child or young person's regular diabetes reviews. Children and young people with diabetes should be advised to have regular oral health reviews, in line with the [NICE guideline on dental checks: intervals between oral health reviews](#). This guideline update does not recommend a change in the frequency of oral health reviews but there may be a short-term increase due to increased awareness of periodontitis after publication of the guideline. Any increase in the number of oral health reviews may impact on the service, as NHS dental services already have capacity issues. This might also lead to a short-term increase in costs but there is likely to be a larger long-term reduction in costs from the improvement to oral health and diabetes control. There may also be additional training requirements for diabetes and oral healthcare professionals around awareness of periodontal disease. This is not expected to lead to a significant resource impact at a national level.

Diabetes services are commissioned by integrated care systems/clinical commissioning groups. Providers are NHS hospital trusts, community providers and primary care providers.

Dental services are commissioned by NHS England. Providers are NHS hospital trusts and dental surgeries.