

Speight J and The DAFNE Study Group* (2005) Predicting outcomes in the Dose Adjustment For Normal Eating (DAFNE) Trial. *Proceedings of the British Psychological Society* **13** (1) 89.

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Background: In the UK, DAFNE training in flexible intensive insulin therapy significantly reduced the negative impact of diabetes on quality of life (QoL) and improved blood glucose (BG) control without significantly increasing severe hypoglycaemia or body mass index (BMI). Analyses were conducted to predict who would benefit most from the generally highly successful DAFNE training and who might experience undesirable effects (e.g. weight gain).

Methods: Multiple regression was used to predict change in outcomes (6-months post-DAFNE) using baseline data: demographic, biomedical, ADDQoL (measure of the impact of diabetes on QoL), extended DTSQ (Diabetes Treatment Satisfaction Questionnaire), and other psychological measures including diabetes-specific well-being and locus of control.

Findings: Greatest improvement in ADDQoL scores was achieved by those reporting less dietary freedom and less treatment satisfaction at baseline ($R^2=0.21$). BG improvement was predicted by higher baseline BG, lower perceived frequency of hypoglycaemia, greater expectations of DAFNE, and greater BMI ($R^2=0.30$). Increase in BMI was predicted by less dietary freedom, DAFNE training centre, and less 'satisfaction with insulin' at baseline ($R^2=0.23$).

Discussion: DAFNE has important benefits to offer. Lifting dietary restrictions had substantial benefits for QoL. BG improvement was predicted by baseline BG but also by expectations (perhaps reflecting greater optimism or determination). Prediction of weight gain was more complex. The influence of training centre will have involved implicit messages conveyed by Educators before and during DAFNE. While DAFNE was successful overall, outcomes are likely to be maximised for individuals if their expectations and personal goals are considered by DAFNE Educators.