

Long-Term Glycemic Control in T2D

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Published June 21

Background

Emerging evidence indicates that CGM use is associated with improvements in glycemic control in adults with T2D NIT

Aim

To evaluate 12-month change in CGM metrics in people with T2D who were *not using insulin* and not meeting glycemic targets

Study Design

Retrospective analysis

Primary Outcomes

- Change in CGM metrics from baseline to 6 months and 12 months
- Change in TIR and TITR associated with the use of Dexcom High Alert

Study Population

Participants: (n=3,840)



T2D NIT
(non-insulin)



Medicare age adults
≥65 years old (12.4%)



Baseline **TIR** ≤70%

Results

Use of CGM was associated with significant improvements in glycemic outcomes in adults with T2D NIT at 1 year

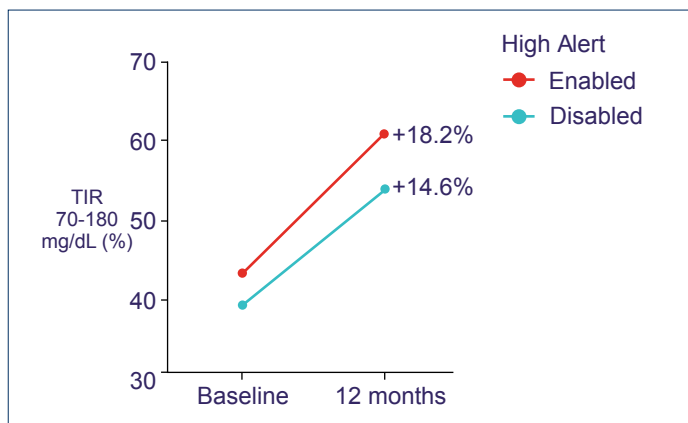
Metric	Baseline	6 months	Change from baseline	P-value	12 months	Change from baseline	P-value
GMI, %	8.1 (0.9)	7.7 (1.0)	-0.4 (1.1)	<0.001	7.6 (1.1)	-0.5% (1.2)	<0.001
Percent time, %							
TIR 70-180 mg/dL	41.7 (21.4)	56.8 (28.2)	15.1 (30.5)	<0.001	59.0 (28.9)	17.3% (32.1)	<0.001
TITR 70-140 mg/dL	12.1 (10.8)	25.9 (23.3)	13.8 (23.8)	<0.001	28.6 (25.1)	16.4% (26.0)	<0.001

● >4 additional hours TIR per day

Alerts Featured by Dexcom CGM Result in Significant Improvements in TIR and TITR

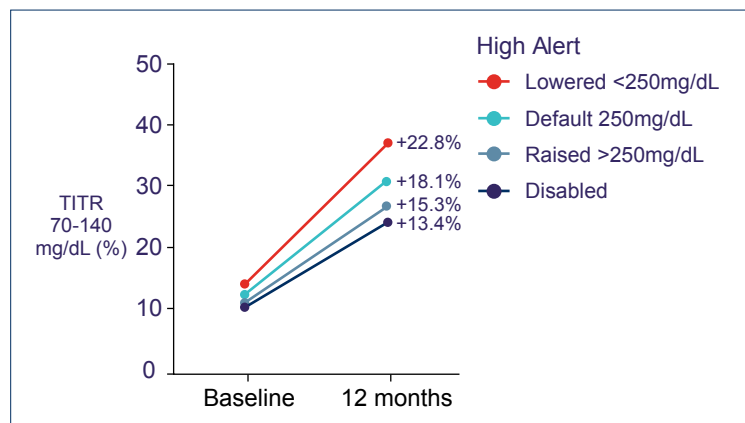
Dexcom High Alert is a customizable setting in the Dexcom app that alerts users when their sensor reading is at or above their selected glucose level

↑↑ Greater increase in TIR
with High Alert enabled vs disabled



~75% kept High Alert enabled
Significant improvement even with alert disabled

↑↑ Greatest increase in TITR
when High Alert lowered <250 mg/dL



Progressive improvement with lower alert settings
~40% raised the High Alert

Key Takeaways for Managed Care Decision Makers

- ✓ Dexcom CGM is associated with sustained improvements in glycemic control over 12 months, with the High Alert setting providing the greatest improvement in TIR and TITR.
- ✓ High adherence and self-selected use of Dexcom CGM suggest enhanced member experience.