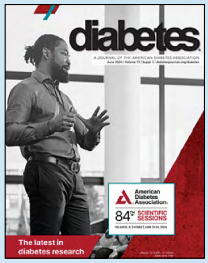
Cost-Effectiveness in T2D

HAMZA ALSHANNAQ, GREGORY NORMAN, PETER LYNCH



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Background

In the United States, diabetes and its complications resulted in a total cost of $412.9 billion in 2022

Aim
To investigate the cost-effectiveness of rtCGM from a US payer perspective

Study Design
- US retrospective study
- *IQVIA Core Diabetes Model version 10.0*

Primary Outcomes
- Cost effectiveness of CGM
- Diabetes-related acute events and micro- and macrovascular complications

Study Population

Participants: (N=36,080)

Clinical data sourced from a large US retrospective study, including people with **T2D receiving insulin therapy**

Results

rtCGM Demonstrated Economic Value by Reducing Disease Burden and Total Costs

Medications & Glucose Monitoring Costs

Regular Follow-up

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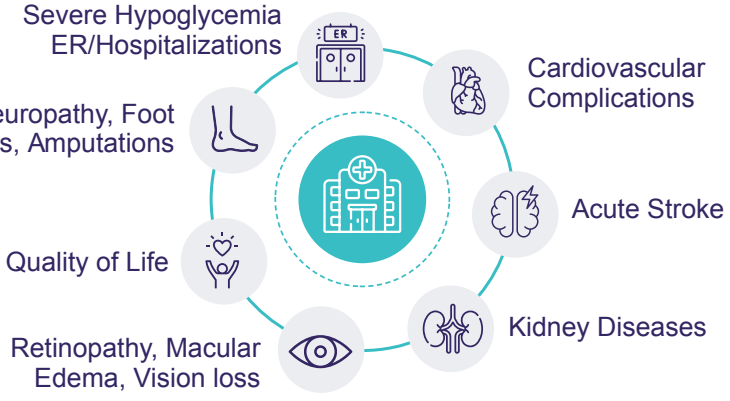

The relative reduction in the total number of events due to rtCGM use for diabetes eye, renal, neuropathy, and cardiovascular complications was 17.0%, 20.0%, 8.7%, and 2.4%, respectively.

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Results *(continued)*

Avoidance of Eye and Renal Complications Were Realized After Only 6 Patients Used rtCGM

Projected Clinical Outcomes	Cumulative Incidence (%)		Relative Risk (vs SMBG)	Number Needed to Treat (NNT)
	RT-CGM	SMBG		
Total Eye Complications	86.55	104.26	0.83	6
Total Renal Complications	63.19	79.01	0.80	6

Key Takeaways for Managed Care Decision Makers

✓ rtCGM is a cost-effective technology for managing insulin-treated T2D. It is associated with increased lifespan, more healthy life years, reduced acute diabetes events, and fewer micro- and macrovascular complications, with projected lifetime cost savings per patient of approximately $7,555.

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