

Changes in the utilization of blood glucose test strips among patients using intermittent-scanning continuous glucose monitoring in Germany

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Aims

To compare the daily consumption of blood glucose test strips (BGTs) prior to and after the initiation of intermittent-scanning continuous glucose monitoring (iscCGM).

Methods

This study included 1343 adults (≥ 18 years) with type 1 (T1D) or type 2 diabetes (T2D; mean age 51.4 years; 39.1% women) from the IMS Disease Analyzer database with an initial prescription of iscCGM in Germany between January 2015 and July 2018 (index date). We compared the average daily BGTs consumption after the index date versus prior to the index date. A multivariate logistic regression model was used to investigate the association between predefined variables and the probability of no longer using BGTs after the index date.

Results

The mean (SD) daily BGTs consumption per patient decreased from 2.7 (3.0) prior to the index date to 1.4 (2.4) after the index date, and was similar in patients with T1D and those with T2D, in women and men, and across different age groups, as well in patients treated in diabetologist practices and those treated in general practices. In total, 40% of patients continued to use BGTs, and 30% used them at least once daily. Male

sex and glycated haemoglobin concentration ($< 6.5\%$), as well as less frequent use of BGTs prior to the index date, were positively associated with non-use of BGTs after the index date.

Conclusions

The daily consumption of BGTs was greatly reduced after the initiation of iscCGM use in patients with diabetes. However, some patients still used BGTs in addition to iscCGM.

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If you would like to read any of the studies in its entirety, please, contact us to obtain the full version of a publication. Also, our research director is at your disposal if you have any further questions. Thank you for your interest!

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Incidence of fractures in patients with type 1 diabetes mellitus-a retrospective study with 4,420 patients

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Abstract

This retrospective study investigated the incidence of fracture in 4420 type 1 diabetes (T1DM) patients. Our findings indicate that patients with T1DM have an increased incidence of fractures. Further studies and preventive measures are urgently needed.

Introduction

The aim of this study was to investigate the incidence of fracture in patients with type 1 diabetes mellitus (T1DM).

Methods

This study is based on the German Disease Analyzer database and included 4258 adult individuals with a T1DM diagnosis documented between January 2000 and December 2015 in 1203 general practices in Germany. Individual matching of T1DM and non-diabetic patients was performed. The cumulative incidence of new fractures was shown for up to 10 years after the index date using Kaplan-Meier curves. Cox proportional hazard models (dependent variable: incident fracture) were used to estimate the effect of T1DM on fracture incidence, as well as the effect of predefined variables on fracture incidence.

Results


After 10 years of follow-up, the cumulative fracture incidence was 18.4% for T1DM patients and 9.9% for non-diabetic patients ($p < 0.001$). A strong association between T1DM and fractures was found (HR, 2.01 (95% CI, 1.70-2.38) $p < 0.001$) in both female and male

patients. Significant differences between T1DM and non-diabetes patients were found in lower leg/ankle, foot and toe, shoulder/upper arm, and rib(s), sternum and thoracic spine fractures. A significant association between higher age and fracture incidence was observed in T1DM patients.

Conclusions

In summary, we found that patients with T1DM have a twofold increased fracture rate compared with healthy controls. Furthermore, fractures were associated with increased age and high HbA1c values.

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