Combination Basal Insulin and GLP-1 RA Therapy: A Physiologic Approach to Diabetes

Participation

2,365* Total Attendees

9 Cities

1,288* On Site

1,077* Simulcast / Virtual Symposium
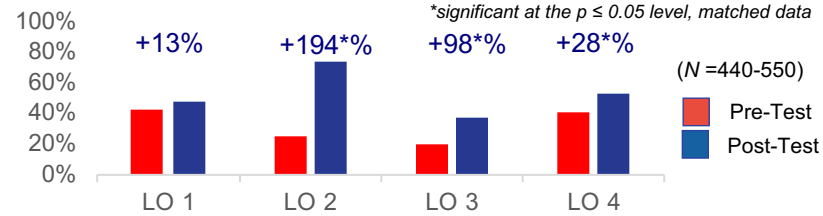
1,568 certificates issued to date

Attendee Patient Care Focus: 95%

This education has the potential to impact **1,352,780** patients with Diabetes on an annual basis.
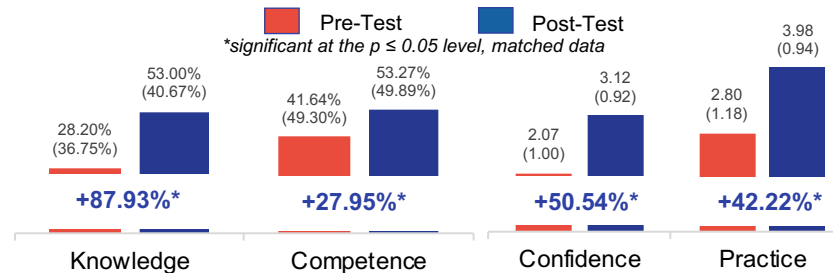
23,650–28,380 Patients Weekly

2018 Symposium/Simulcast	Date	Attendees
White Plains, NY	9/8/18	189
Orlando, FL	9/15/18	199
Seattle, WA	9/22/18	103
Philadelphia, PA (King of Prussia)	10/6/18	79
Anaheim, CA	10/13/18	98
Charlotte, NC	10/20/18	115
Phoenix, AZ	10/27/18	116
Phoenix, AZ simulcast	10/27/18	550
Dallas, TX	11/3/18	260
Miami, FL	11/10/18	129
Virtual	11/17/18	527
Total		**2,365**

Learning Gains Across Objectives

*significant at the p ≤ 0.05 level, matched data

+13%   +194*%   +98*%   +28*%

(N =440-550)

Pre-Test / Post-Test

- **+13.51% Improvement**: Discuss the benefits of a pathophysiologic vs algorithmic approach to type 2 diabetes (T2D) management
- **+193.65%* Improvement**: Utilize effective strategies to overcome barriers to therapeutic intensification and clinical inertia in T2D management
- **+98.04%* Improvement**: Realize the limits of basal insulin therapy in clinical practice and when there is a greater need to address post-prandial hyperglycemia
- **+27.95%* Improvement**: Identify patients who are most likely to benefit from combined basal insulin-GLP-1RA therapy as an effective means of combining endogenous/exogenous insulin therapy
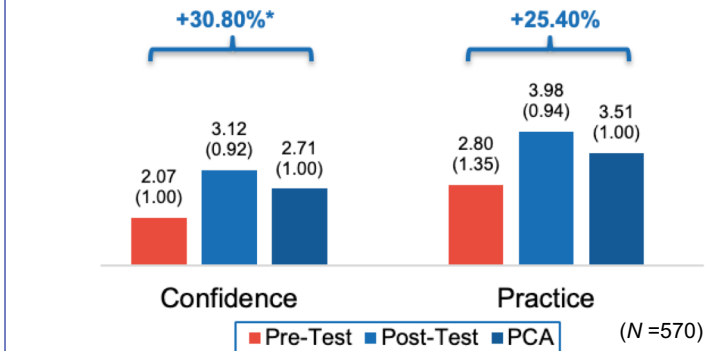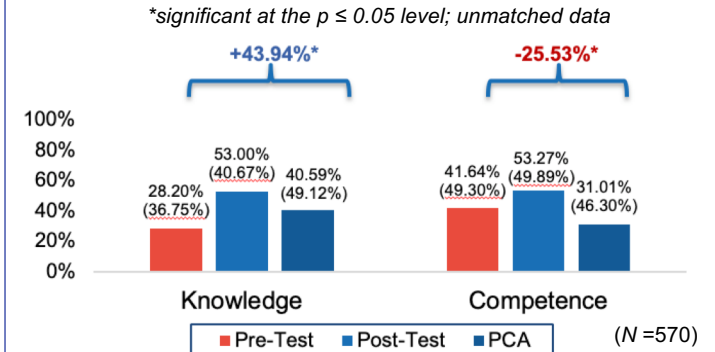
Learning Domain Analysis

Pre-Test / Post-Test
*significant at the p ≤ 0.05 level, matched data

Knowledge	Competence	Confidence	Practice
28.20% (36.75%) → 53.00% (40.67%)	41.64% (49.30%) → 53.27% (49.89%)	2.07 (1.00) → 3.12 (0.92)	2.80 (1.18) → 3.98 (0.94)
+87.93%*	+27.95%*	+50.54%*	+42.22%*

- Even after substantial and significant improvements, Post-Test averages for the scored Knowledge and Competence domains remained low (both 53%).
- The substantial 88% increase in Knowledge was driven by a score increase of 194% on an item about clinician misperceptions regarding the use of injectable agents in patients with T2D.
- The 51% gain in Confidence was due to the increase in reported Confidence to identify patients for whom fixed-ratio basal insulin/GLP-1 RAs may be appropriate. Confidence levels, however, remained low.
- Learners substantially increased their reported intent to use a physiologic approach to selecting therapy for T2D, resulting in a high Post-Test practice strategy rating (4.0).

4-Week Retention Analysis

LEARNING RETENTION: Statistically significant net gains were measured from Pre-Test to the Post Curriculum Assessment (PCA) in all areas except for Competence.

*significant at the p ≤ 0.05 level; unmatched data

+43.94%*   -25.53%*

Knowledge	Competence
28.20% (36.75%) → 53.00% (40.67%) → 40.59% (49.12%)	41.64% (49.30%) → 53.27% (49.89%) → 31.01% (46.30%)

Pre-Test / Post-Test / PCA   (N =570)

+30.80%*   +25.40%

Confidence	Practice
2.07 (1.00) → 3.12 (0.92) → 2.71 (1.00)	2.80 (1.35) → 3.98 (0.94) → 3.51 (1.00)

Pre-Test / Post-Test / PCA   (N =570)

In the Competence domain, a net-decrease of 26% was measured between the Pre-Test and PCA, highlighting learner difficulty in the ability to select treatment based on specific A1C, postprandial and fasting glucose levels.

NACE