

A Point-of-Care Decision Support Tool Reveals Variance Between Clinicians and Experts in Selecting Among GLP-1 RAs in Type 2 Diabetes

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1. Background

To help clinicians understand GLP-1 receptor agonist (GLP-1 RA) therapies and their novel characteristics and to help them choose among GLP-1 RAs for patients with T2D, we developed an online tool where choice of treatment among GLP-1 RAs is guided by a panel of experts.

The goal was to provide real-time recommendations based on patient-specific characteristics and to identify variances between the treatment strategies of experts and community clinicians.

Five diabetes experts provided treatment recommendations for a combination of patient variables totaling 48 possible scenarios based on:

A1C level

Need for weight loss

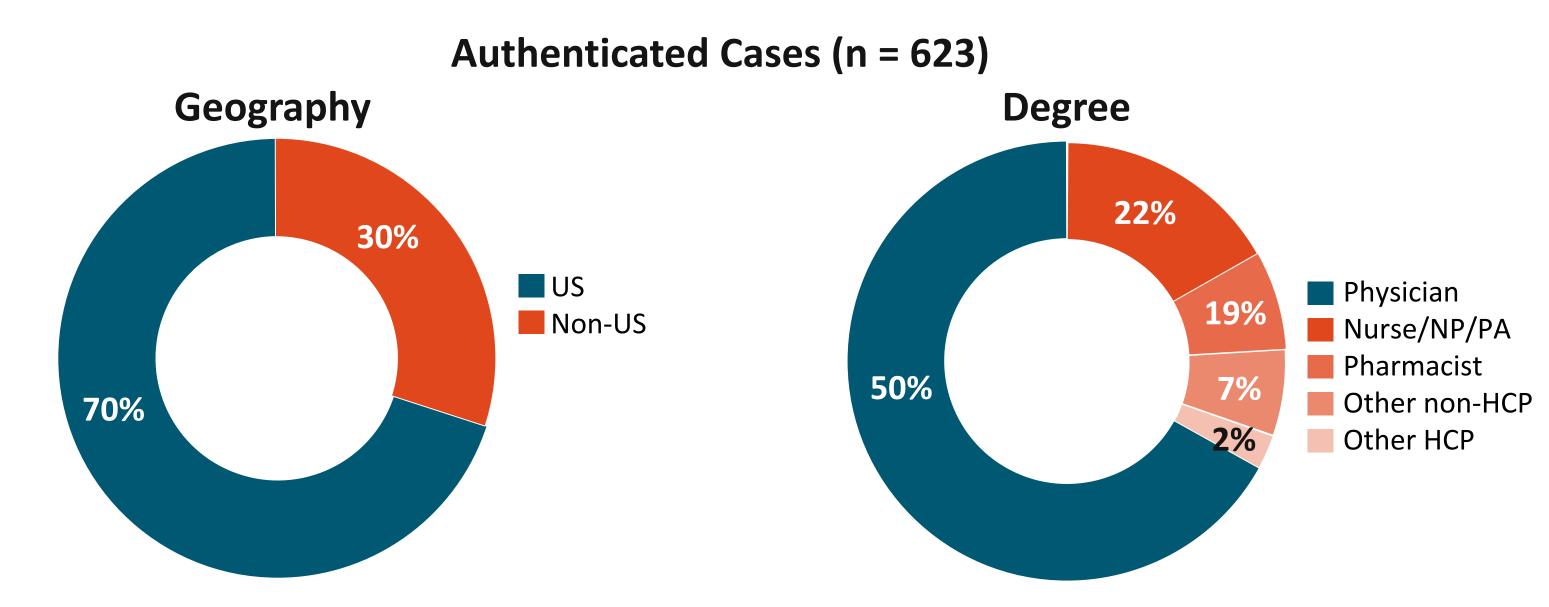
CVD

Retinopathy

CKD

2. Cases

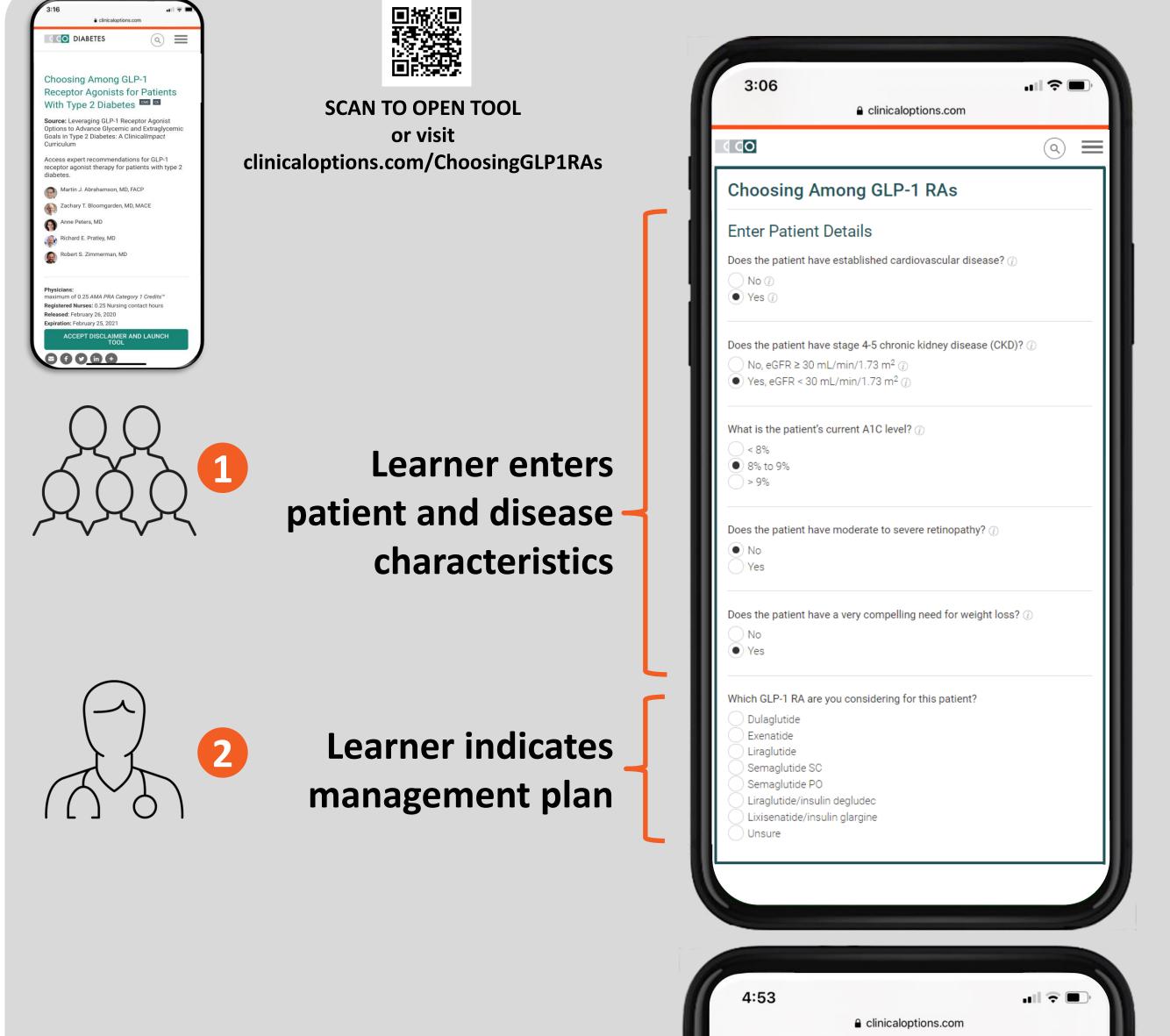
- From February through October 2020, 983 learners entered N = 1433 cases into the tool
 - n = 365 cases via the app (anonymous)
 - n = 623 cases via the CCO site (authenticated)

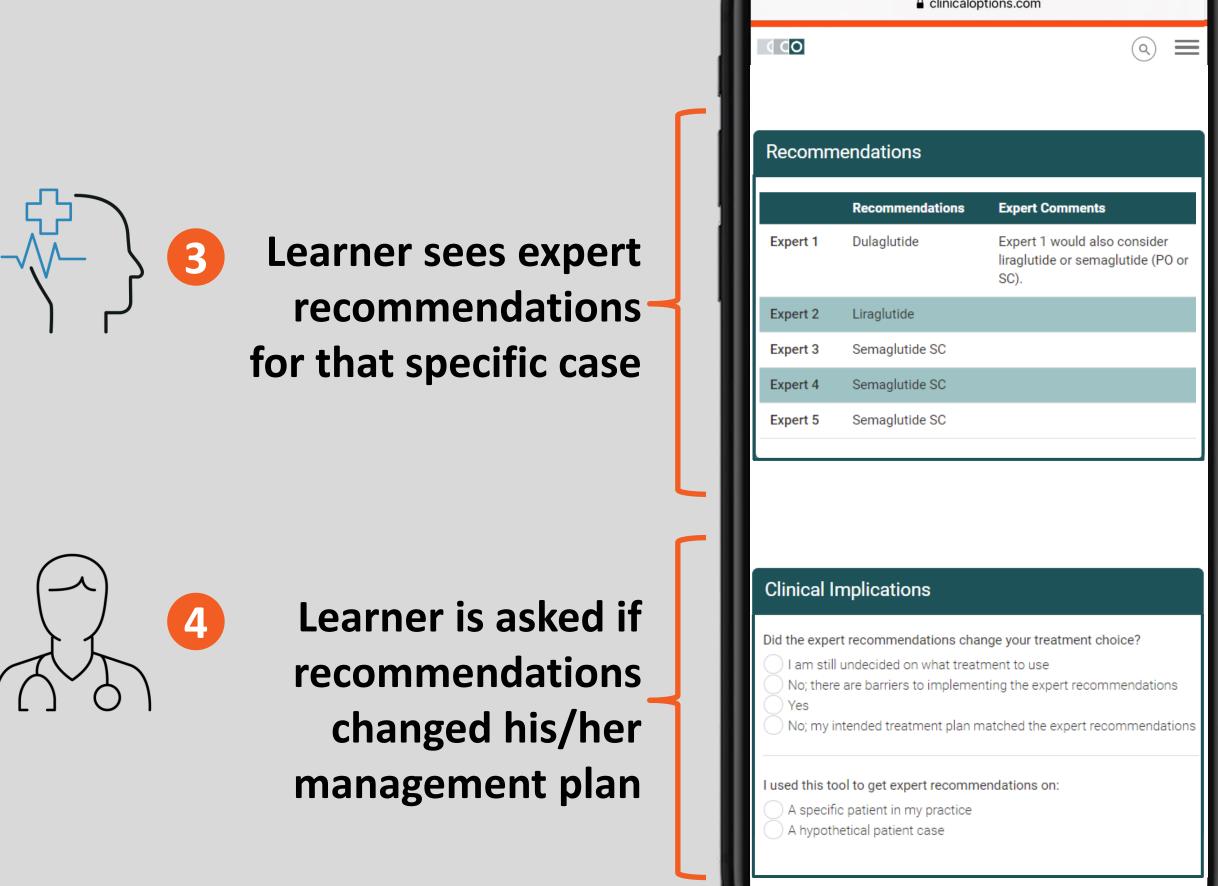


Of 584 cases where learners specified:

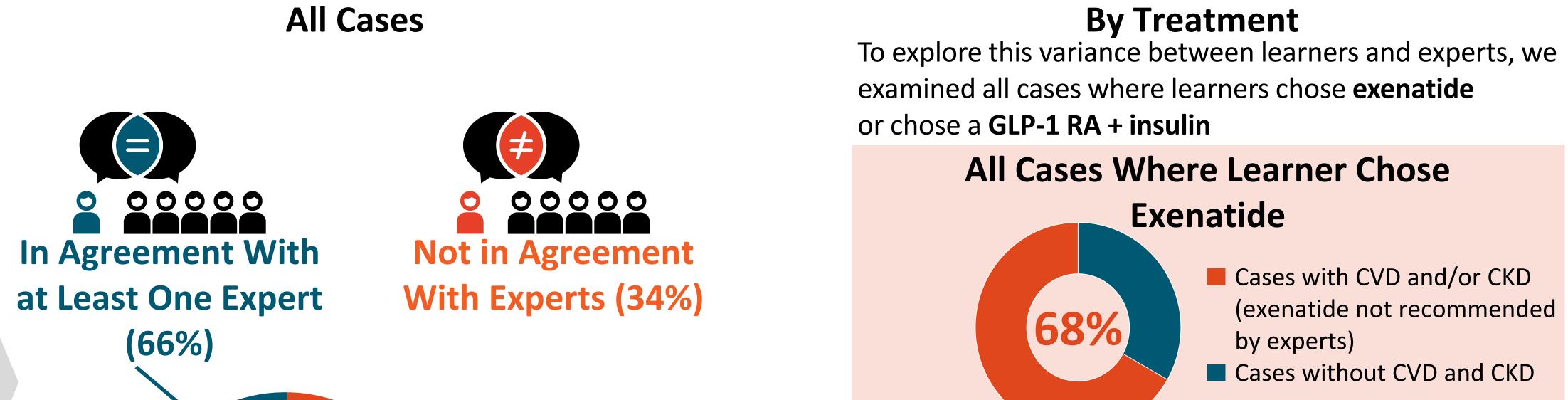
- 38% were real patients
- 62% were hypothetical cases

3. Online Decision Support Tool Provides Patient-Specific Recommendations





4. Learners' Initial Choice of GLP-1 RA



Undecided/other

Learner chose exenatide

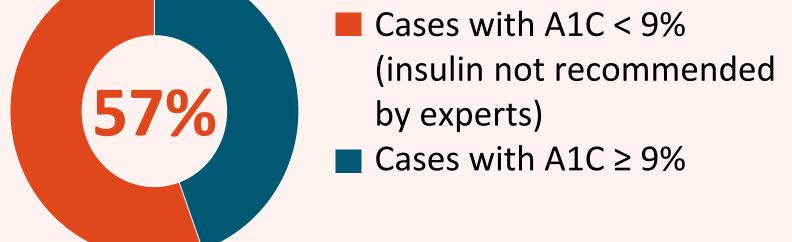
when no expert chose it

when no expert chose it

Learner chose **GLP-1 RA + insulin**



n = 93



n = 89

Subset of Learner Cases Where Baseline Plan Differed From Experts and Learner Identified Future Plan

5. Posteducation Impact

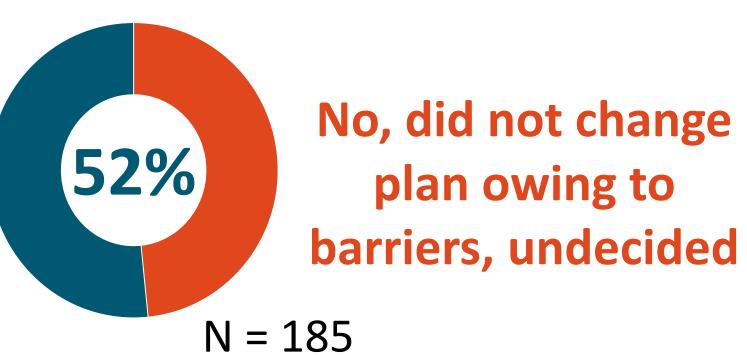


Did the recommendation change your management choice?

N = 1433

34%

Yes, changed plan to match experts



6. Conclusions

- Learners' initial choice of GLP-1 RA differed from experts for 34% of case scenarios, highlighted continuing gaps in clinicians' ability to select among GLP-1 RAs for T2D
- These cases of variance included:
 - Use of exenatide in patients with CVD and/or CKD
- Use of GLP-1 RA + insulin in patients with A1C < 9%
- Of cases in which the learners' intentions differed from expert recommendations, 52% indicated that they
 planned to change their approach after being provided the recommendation by the tool, suggesting the tool's
 use can help optimize care of patients with T2D

