



Tuesday, December 19, 2023

7pm ET

6pm CT

5pm MT

4pm PT


(free) 1 hour CME/CPE/CEU certified†

SSIPs

sessions on SIPs

*Smarter MDI
via Smarter
Insulin Pens*
**Patient-centric
Partnering in
Data-driven
Practice**

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Irl B. Hirsch
MD, MACP

Diana Isaacs
PharmD, BCPS, BCACP, CDCES, BC-ADM, FADCES, FCCP

INTENDED AUDIENCE

Diabetologists, Endocrinologists, Primary Care Physicians, Physician Assistants, Nurse Practitioners, Pharmacists, Certified Diabetes Care and Education Specialists and other Health Care Professionals interested in the management of diabetes.

EDUCATIONAL OBJECTIVES

At the conclusion of this program, participants will be better able to:

1. Recognize how Smart Insulin Pens (SIPs) are standard of care for Multiple Daily Insulin (MDI) therapy
2. Identify how SIPs address unmet needs of missed doses, calculating doses, numeracy, insulin stacking, fear of hypoglycemia, need for MDI data of patients on injection therapy
3. Describe the RoadMap, and evolution, of SIPs
4. Facilitate shared decision making, with the patient, to determine best method of insulin delivery
5. Synch SIPs with data sources (CGM and/or blue tooth enabled BGMs)
6. Instruct patients how/when to send data reports to care team
7. Maximize use of data reports to partner with patient in optimizing insulin regimen on a timely basis, including via potential remote patient monitoring

ACCREDITATION AND DESIGNATION

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Provider approved by the California Board of Registered Nursing, Provider Number 17004 for 1.0 contact hour.

*This activity is eligible for ACPE credit; see final CPE activity announcement for details.



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Corine Peugh, PwD has nothing to disclose.

EDITORIAL

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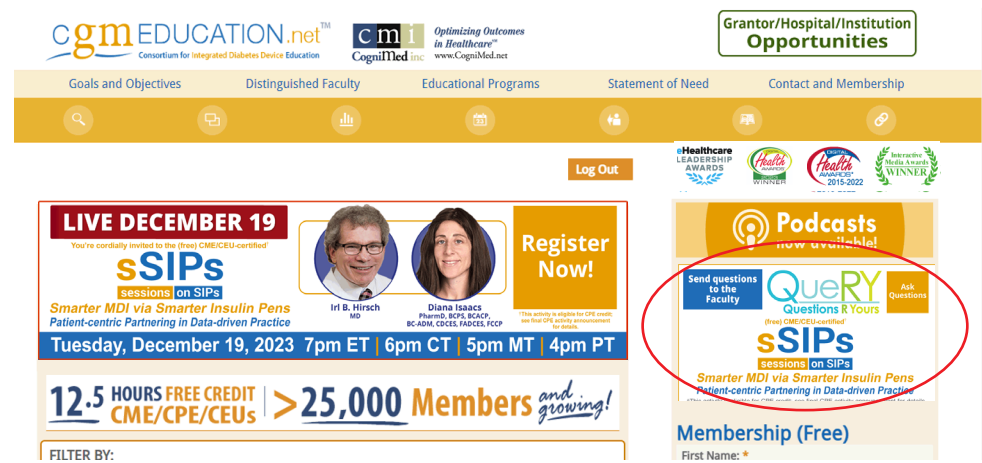
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Program


Using Smart Insulin Pen Integrated Data to Optimize Insulin Regimens for MDI Patients



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Building a Data-Driven Practice Model with Smart Insulin Pens (SIPs)



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Irl B. Hirsch, MD, MACP

Professor of Medicine
Diabetes Treatment and Teaching Chair
University of Washington
Medicine Diabetes Institute
Seattle, Washington

Irl B. Hirsch, MD, is professor and Diabetes Treatment and Teaching Chair at the University of Washington Medicine Diabetes Institute in Seattle.

Dr Hirsch received his medical degree from the University of Missouri School of Medicine in 1984. He completed residency training in internal medicine at Mount Sinai Medical Center in Miami and Miami Beach, Florida. Dr Hirsch also was fellowship-trained in endocrinology and metabolism at Washington University School of Medicine in St. Louis.

Dr Hirsch has dedicated his career to patient care, clinical research and teaching. His focus in these areas is the treatment and management of diabetes. He has an interest in new technologies for the treatment of diabetes, particularly those involved in the use of insulin therapy. This interest centers on the mechanisms of how insulin co-modulates inflammation with glucose and how this results in improved outcomes for patients.

He has been involved in numerous major clinical research trials, including the DCCT, ACCORD, STAR-1, JDRF Sensor Trial, SEARCH, ORIGIN, ADAG, FLAT-SUGAR, and many more involved with insulin therapy.

Additionally, he has an interest in the use of computers in diabetes data management, and how pattern recognition can be used to improve diabetes control and how glycemic variability noted on glucose meter downloads may be an independent risk for microvascular complications.

Dr Hirsch has authored more than 200 research papers, including a review of insulin in the New England Journal of Medicine. He also has written more than 60 editorials,

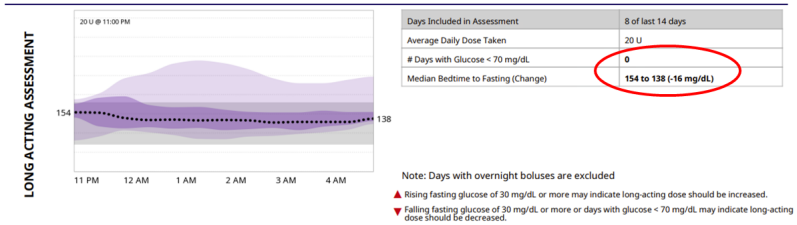


What are the Advantages of SIPs?

- Both patient and provider can review the data which is passively collected on an app
 - Can look at timing of insulin dosing, use of over-rides and under-rides depending on many factors, including trend of the glucose at the time on CGM
 - Can assess if meal dosing parameters are correct
 - Can assess basal dosing via "BeAM Score" (Bedtime glucose – AM glucose)

What is the BeAM Score and Its Significance?

- Using CGM: mean Bedtime glucose – mean AM glucose
- What a SIP can do: not count those nights when correction dose prandial insulin is provided
- BeAM target for T1D is < 30 mg/dL. A BeAM > 30 mg/dL in T1D is consistent with "over-basalization". (ex: T1D on MDI with 20 units glargine at 11pm)



three commentaries for The Journal of the American Medical Association, numerous book chapters and four books for patients and physicians. He is also a much in demand national and international speaker.

He is the past editor-in-chief of DOC News and Clinical Diabetes and former chair of the Professional Practice Committee for the American Diabetes Association and served as a member of the Endocrine Section of the American Board of Internal Medicine. Currently, he is section editor for Up-To-Date.

Dr Hirsch has been honored at every level of his career, including being recognized with the Outstanding Young Physician Award by the University of Missouri Alumni Association in 2001, and in 2003 being honored as the American Diabetes Association's

Physician- Clinician of the Year. In 2005, he received the American Association of Clinical Endocrinologists' Distinguished Endocrinologist Award, and in 2013, he received the American Diabetes Association's Josiah K. Lilly Sr. Distinguished Service Award. In April 2015 he was elected to a Mastership by the American College of Physicians.

Conclusions

- SIPs are under-utilized and can help both patients and providers with their diabetes self-management
- SIPs can help assess basal doses and like insulin pumps, can help with bolus dosing
- For the first time with MDI patients, providers can really understand how patients are self-managing their diabetes
- The 2023 Seahawks are not very good





Smarter Insulin Dosing with Smarter Insulin Pens: Practicum

Diana Isaacs, PharmD, BCPS, BCACP CDCES, BC-ADM, FADCES, FCCP

Endocrine Clinical Pharmacy Specialist
Director, Education & Training in
Diabetes Technology
Cleveland Clinic Endocrinology &
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Diana Isaacs, PharmD, BCPS, BC-ADM, BCACP, CDCES is the Continuous Glucose Monitoring (CGM) Program Coordinator and Endocrinology Clinical Pharmacy Specialist at the Cleveland Clinic Diabetes Center. She provides medication management and runs a robust CGM shared medical appointment program.

Dr Isaacs earned her Bachelor's Degree in Chemistry from the University of Illinois at Chicago, Doctor of Pharmacy Degree from Southern Illinois University Edwardsville and completed a pharmacy practice residency with emphasis in ambulatory care at the Philadelphia VA Medical Center. Dr Isaacs holds board certifications in pharmacotherapy, ambulatory care, and advanced diabetes management. She serves in leadership roles for several pharmacy and diabetes organizations. She is the Communications Director for the American Diabetes Association (ADA) Pregnancy and Reproductive Health Interest Group and serves on the ADA Professional Practice Committee for 2020-2021, the committee that updates the ADA Standards of Care. She is also the president of the OH Association of Diabetes Care and Education Specialists (ADCES).

She has numerous diabetes publications and research projects with a focus on medications, CGM and diabetes technology. Dr Isaacs was awarded the Ohio Pharmacists Association Under 40 Award in 2019. She is the 2020 ADCES Diabetes Care and Education Specialist of the Year.

Dose Calculator

- Reduced fear of hypoglycemia
- Improved confidence in the accuracy of their insulin bolus dose
- Increased treatment satisfaction

A1C 0.7 to 1.0% reduction in A1C with the use of an automated dose calculator.

Zigler R, Green DA, Gorman L, et al. Diabetes Care. 2018;41(10):2022-2028.
Bernal JJ, Beebe DJ, Young B, et al. Diabetes Care. 2018;41(10):2029-2035.
Wang J, et al. Diabetes Care. 2017;40(12):2022-2028.

Sharing Data

CareLink™ ? Diana Isaacs
C.C.F. Diabetes Center

CareLink™ Personal: Linked Upload Device

REPORTS | REPORT SETTINGS | PATIENT PROFILE

PUMP, CGM, METER | **INPEN™**

Insights by InPen™

CareLink™ report settings cannot be applied to the Insights by InPen™ report.
Work with your patient to adjust settings in the InPen™ app if modifications are needed.

Select date range: Last 7 days | **Last 14 days** | Last 30 days | Last 90 days

Generate Report

Key Take Aways

- Smart Insulin Pens offer more customized dosing and reduce risk of missed doses or double dosing
- Many personalized settings that can be set based on calculations and discussion with the person with diabetes
- Determine frequency of review (often more in the beginning) and continue to fine tune settings based on changing needs

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