

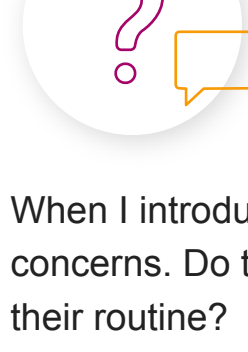
Forever or for now? Long-term versus short-term value of diabetes tech

Tech-up Perspectives | Issue 8

Welcome to another Diabetes Tech-up™ monthly newsletter! In this issue, diabetes care and education specialist Amy Hess-Fischl covers the short- and long-term potential of diabetes tech based on patient experiences.

You can also check out

- A [new podcast episode](#) about matching diabetes tech to the individual
- A [new article](#) from Diana Isaacs and Natalie Bellini on how the CGM may be a diabetes-tech gateway for patients



Amy, how do you talk with patients about the potential short- or long-term benefits of diabetes tech?

When I introduce people to diabetes tech, I talk about it based on their needs and concerns. Do they want immediate insights or ongoing information they can add to their routine?

The key is helping everyone find their own balance. I start by asking, in a judgment-free tone, “What are you willing to do?” If they don’t feel the tech’s value is worth the inconvenience, we find another option that fits their comfort level.

I’m also honest about the potential upsides (eg, behavioral insights), downsides (eg, device fatigue), and short- versus long-term use of each device.¹

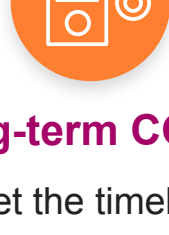
Three examples of tech use over time

Of course, the below ratings reflect my general experience. Each patient’s needs will dictate if they want the device for short- or long-term use.

Type of tech	Short-term potential	Long-term potential
Continuous glucose monitor (CGM)	●	●
Food-tracking app	●	●
Insulin pump	●	●

Key: ● Yes, definitely ● Weigh the pros and cons ● Not worth it

Here’s how I’ve helped people find their sweet spot for these 3 types of tech.



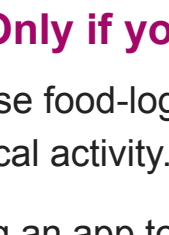
1. Short-term or long-term CGM? How about both

With CGMs, the individual’s needs set the timeline. When someone starts using a CGM, they may not know how long they want to wear it. The good news is CGMs can be great behavioral learning tools even if people only wear them for a few weeks.^{1,2}

When people look at the detailed picture of their highs and lows, they may identify possible lifestyle changes. When we regroup, I can help them put that change into action. Then it’s time to ask, “Is that enough?”¹

I had one patient use a CGM for a month, make some lifestyle changes, and then discontinue the CGM due to budget concerns. Six months later, her A1C rose back to 12%, so she started wearing the CGM again. Within a week, she spotted trends she could change, and we made a plan to help her stick with the changes this time.

I’ve had many patients keep using CGM for years or decades, as long as they feel it’s a good fit personally and financially, to help them manage their eating, exercise, and insulin timing. And, thanks to recent Medicare changes, CGMs are now affordable for most people on insulin.³

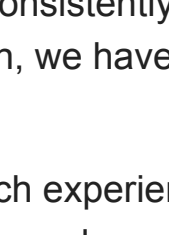


2. Long-term food logging? Only if you’re a glutton for punishment

I’ve worked with many people who use food-logging apps for short periods to help change their eating habits and physical activity.

For the first few days or weeks, using an app to evaluate how you eat can be a real eye-opener. It can help you decide when to reduce portion sizes, change the timing of meals, or add insulin.⁴

After that, I don’t generally see people benefiting from tracking their food—it can end up feeling like a lot of effort with minimal payoff. To help people avoid feeling burned out, I usually recommend they stop tracking food after a week or two.



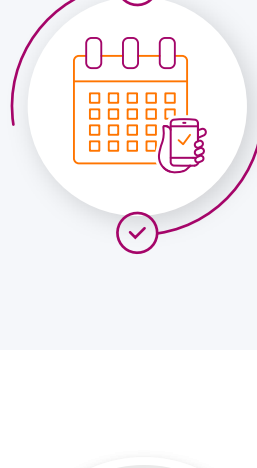
3. The tech may change but the engagement remains

In my experience, an insulin pump can help set people’s baseline engagement level by prompting them to pay attention consistently. They update the settings on their pump regularly, and at every check-in, we have detailed insulin data to evaluate together.⁵

We also talk about ways to refine each experience with tech. One patient who had been using an insulin pump for a year and was exhausted by it asked if she could go back to multiple daily injections. She sounded apologetic, as if she were afraid to let me down. I said, “Of course! Do what works for you.”

Relieved, she put the pump away and started using connected insulin pens. Then, a few months later, she decided she was ready to start with the pump again.

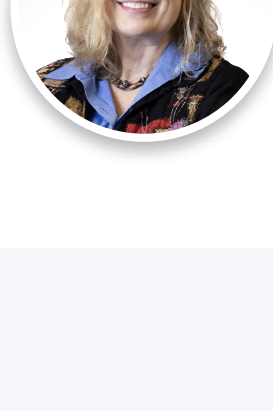
If I had simply assumed she was fine, she might have abandoned the insulin pump without telling me. But because our relationship involved frequent feedback, we were able to adjust her treatment plan together.



Key takeaway

How long a person uses diabetes tech ultimately depends on what they’re getting out of it.

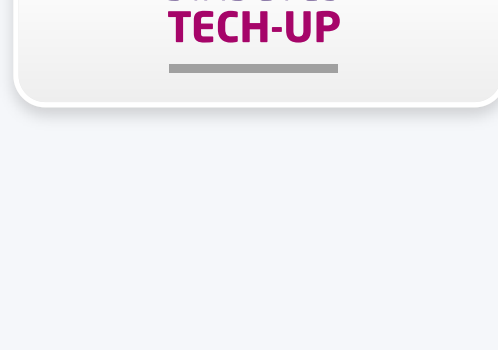
CGMs, insulin pumps, and diabetes apps can all help engage patients in their self-management, and it’s up to the clinician and patient to balance utility with comfort.



Amy Hess-Fischl, MS, RDN, LDN, BC-ADM, CDCES

Amy is a diabetes care and education specialist and registered dietitian who sees type 1 and type 2 diabetes patients daily. Amy received a fee from Novo Nordisk for her participation.

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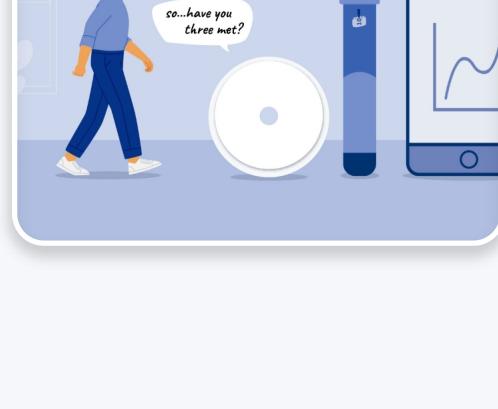


PODCAST
Ep 12: I like long walks on the beach and well-designed diabetes apps

Our cohosts discuss choosing tech to meet the needs of specific individuals with diabetes, including athletes, the visually impaired, and people who need help with carb counting.

22 min listen

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ARTICLE
Well connected: How CGMs can help introduce patients to other diabetes tech tools

Entry-level tech can be a gateway for patients to engage with other diabetes technologies. What’s the clinician’s role in helping patients achieve their tech potential?

Diana Isaacs, PharmD, BCPS, BCACP, BC-ADM, CDCES and Natalie Bellini, DNP, FNP-BC, BC-ADM, CDCES | 10 min read

[Read the article →](#)

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The Mission of Diabetes Tech-up™

Diabetes Tech-up™ is sponsored by Novo Nordisk, a global leader in diabetes. We believe that adoption of innovative technologies can help appropriate patients better manage diabetes. Our goal is to provide information to help health care professionals on the front line of diabetes care strengthen their understanding of diabetes technologies and implement them where they can have the greatest impact.