

## Diabetes disease in its complexity Clinician's perspective

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#### Speaker disclaimer



C. Mathieu is or has been consultant for and KU Leuven has received research support or honoraria from: NovoNordisk, MSD, Eli Lilly, Sanofi, Novartis, AstraZeneca, BMS, Janssen Pharmaceuticals, Pfizer, Medtronic, Roche, Servier



# Goal of therapy in diabetes mellitus

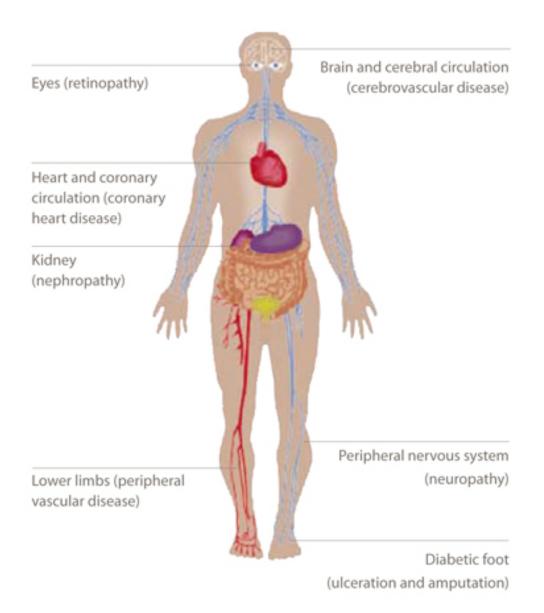
Quantity of life\*

and

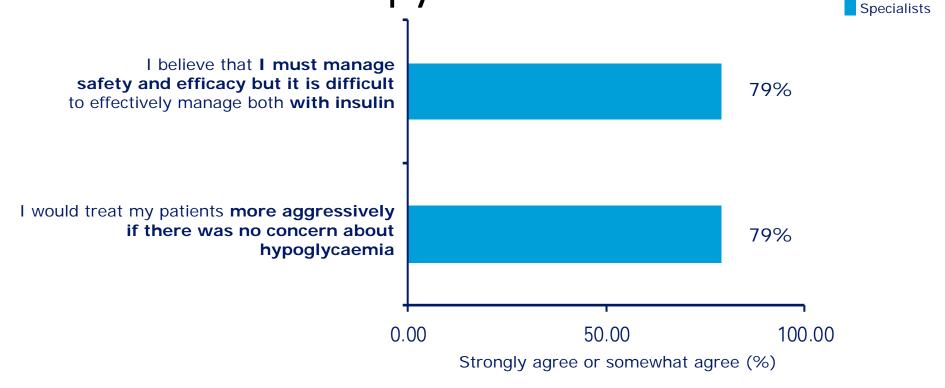
Quality of life\*

<sup>\*</sup>mainly determined by complications

#### Diabetic complications



GAPP<sup>TM</sup> study: Hypoglycemia as obstacle for therapy for doctors



#### **GAPP**<sup>TM</sup>

- A global internet survey of patient and physician beliefs regarding insulin therapy
- N=1250 physicians

## Therapy of diabetes = risk factor management

- Microvascular complications: Glycemic control
- Macrovascular complications:
  - Lifestyle
  - Weight
  - Blood pressure
  - Lipids
  - Glycemic control
  - **—** ....
- Cancer risk

## Therapy of diabetes = risk factor management

- Microvascular complications: Glycemic control
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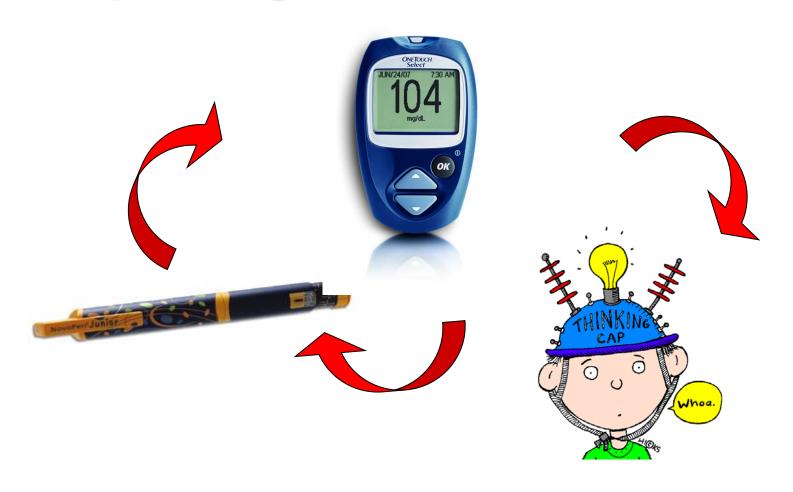
#### Type 1 diabetes

= Destruction of beta cells



Therapy: Replacement of all beta cell functions

#### Replacing all beta-cell functions



#### Type 1 diabetes: Tools

- Insulin
- Education and selfmonitoring of blood glucose
- Diet
- Lifestyle

#### **Tools**

- Insulin
- Education and selfmonitoring of blood glucose
- Diet
- Lifestyle

## Achieving glycemic control

Insulin

**Exercise** 

**Stress** 



**Nutrition** 

**Stress** 

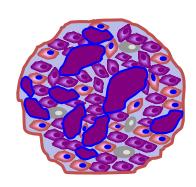
#### Pathophysiology of T2DM

#### T2DM as a Dual Disease:

β-Cell Failure
Insulin Resistance

#### Hyperglycemia and CV risk

Unhealthy lifestyle and environmental factors





Failing beta-cells

Insulin resistance



Metabolic syndrome



Increased risk of cardiovascular disease

Hyperglycaemia



Type 2 diabetes

#### Type 2 diabetes and the heart

Lipids, blood pressure, coagulation, inflammation

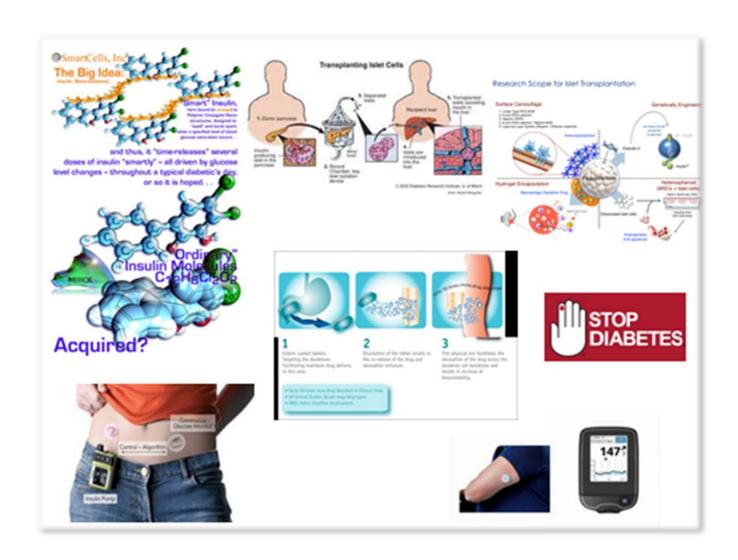
#### Type 2 diabetes: Tools

- Glucose lowering agents
- Education and selfmonitoring of blood glucose
- Diet
- Lifestyle

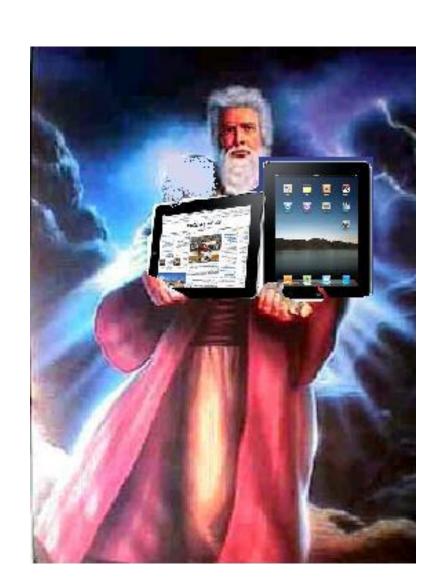
#### Type 2 diabetes: Tools

- Education
- Diet
- Lifestyle
- Multifactorial approach
- Glucose lowering agents
- Selfmonitoring of bloodglucose

#### 'We live in interesting times'



#### Current trends

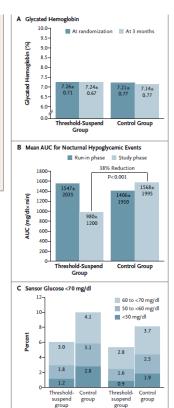


#### ORIGINAL ARTICLE

### Threshold-Based Insulin-Pump Interruption for Reduction of Hypoglycemia

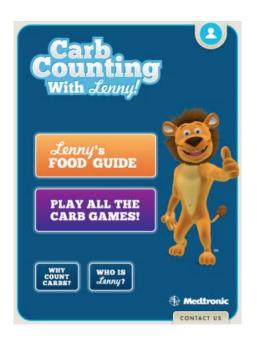
Richard M. Bergenstal, M.D., David C. Klonoff, M.D., Satish K. Garg, M.D., Bruce W. Bode, M.D., Melissa Meredith, M.D., Robert H. Slover, M.D., Andrew J. Ahmann, M.D., John B. Welsh, M.D., Ph.D., Scott W. Lee, M.D., and Francine R. Kaufman, M.D., for the ASPIRE In-Home Study Group\*

Figure 2. Primary and Key Secondary End Points. As shown in Panel A, the mean (±SD) changes in glycated hemoglobin concentrations during the study phase (the primary safety end point) were similar in the threshold-suspend and control groups (0.00±0.44% vs. -0.04±0.42%; difference, 0.05 percentage points; 95% confidence interval [CI], -0.05 to 0.15). As shown in Panel B, the mean area under the curve (AUC) for nocturnal hypoglycemic events during the study phase (the primary efficacy end point) was 37.5% lower in the threshold-suspend group than in the control group (P<0.001). As shown in Panel C, the percentage of sensor glucose values that were less than 70 mg per deciliter was lower in the thresholdsuspend group than in the control group, whether during nighttime hours (6.0% vs. 10.0%) or during daytime and nighttime hours combined (5.3% vs. 8.1%). The P value was less than 0.001 for each range in the panel. (See Table S2 in the Supplementary Appendix for the percentages of sensor glucose values in all ranges.) To convert values for glucose to millimoles per liter, multiply by 0.05551.



Day and Night





# Starches Fruit/Veg Dairy Meats & Fats Other Starches Fruit/Veg Dairy Meats & Fats Other ADD A FOOD ITEM

#### Current trends



#### Data overload...



#### Unmet needs

A clinician's point of view

A patient's point of view

#### What is urgently needed?

- Understanding of diabetesmanagement
  - Patients become experts—
    - Education tools
    - Calculation tools
- Access to diabetes specialists
- Labelling of foods
- Social hurdles
- EDUCATION

#### **EDUCATION**





#### Short term needs

- Achieving full control:
  - Less fluctuation of glycemia's:
    - Less hypo's
    - Less excursions after meals
  - Flat glycemic curves
- Less weight gain!
- No pain:
  - Injecting
  - Measuring blood glucose

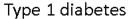
Glucose sensitive insulins- no-hypo insulins Painless glucose values – Continous values

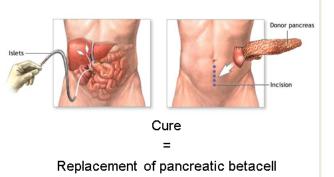
#### Short term needs

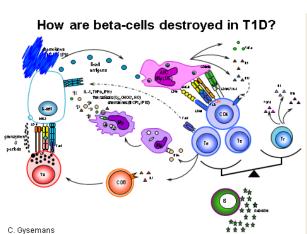
- Artificial pancreas: Intelligent pumps
  - Feedback
  - Closed loop
- Minipumps
- CHEAP

#### Long term needs

- Prediction
- Prevention
- Cure













Natural immunomodulators as novel immunotherapies for Type 1 diabetes

www.naimit.eu

#### Social unmet needs

- Awareness
- Access to endocrinologists





#### 'We live in interesting times'



Day of Affirmation Speech Robert F. Kennedy South Africa June 6th 1966