

Treatment of T2DM

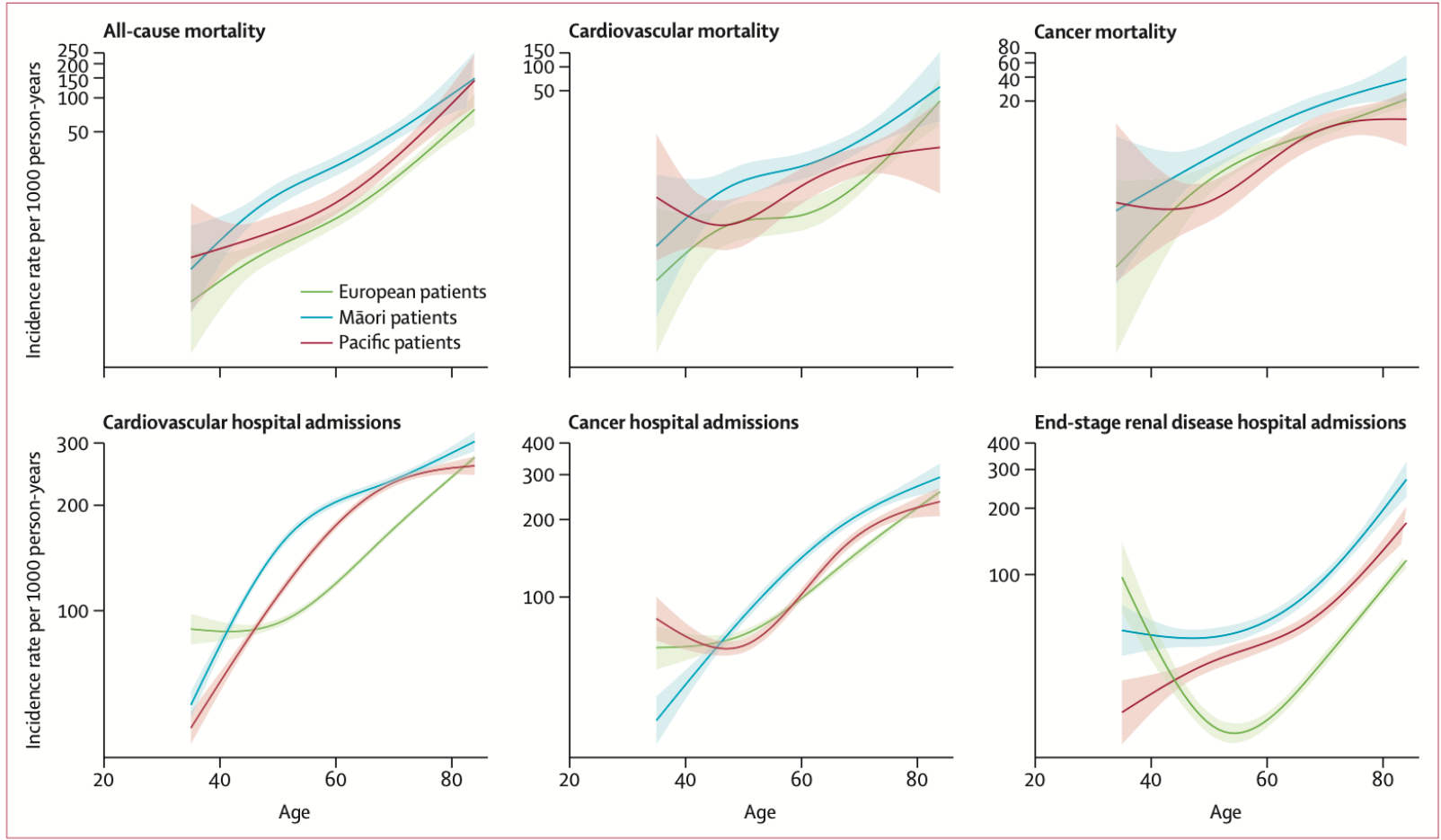
John Baker, Chairman

Who are we?

1. Charitable Trust established 1994
2. Research & lifestyle support organisation
3. Diabetes Care Support Service (1994-2018)
4. Largest audit of diabetes management in Primary Care in the world
5. Mentor Professor David Simmons (West Sydney University)

Diabetes in Counties Manukau

- 1. Common condition**
 - 55,000 people (10% population)
 - 95% Type 2 Diabetes
 - 17% Māori, 40% Pacific, 30% Asian
- 2. Care provider**
 - 85% Primary Care
- 3. Treatment**
 - healthy lifestyle (diet, exercise, weight loss)
 - regular medicines
- 4. Outcomes we try to prevent**
 - diabetic eye disease (blindness)
 - diabetic kidney disease (kidney failure/dialysis)
 - cardiovascular disease (hospitalization, death)





Patient perspectives

(personal observations)

Too many pills

I feel bad when I
take my medicine
(side-effects)

I forget my pills
(injections, tests)

I'm afraid of
hypoglycaemia

Medicine isn't
working

I hate needles

Treatment makes
me gain weight

BG testing makes
my fingers sore



1. Convenient

- **1 tablet once a day**
- **one-injection per week**
- **CG Monitoring**

2. Safe

- No side effects

3. Effective

- Improved well-being
- Reduced risk of dialysis

1. Products

- Suitable products are available but are not publicly funded or the funding criteria is too restricted

2. Safe

- Adverse events <5%
- Weight loss NOT weight gain

3. Effective

- 40% reduction in diabetes deaths
- 15-year delay in progress to dialysis

Frustrations

1. No new diabetes drugs funded 2005-2021
2. No weight loss drugs funded
3. Failure to consider patient perspective (adherence & drug side effects)
4. Failure to consider health system economic implications
5. Failure to manage health inequities (Māori & Pacific)

Steps to resolve frustrations

1. Consider patient perspectives
2. Consider health system economic implications in funding new drugs
3. Manage health inequities (i.e. prioritize new drugs for Māori & Pacific)
4. Establish separate agency to determine new drug priorities (e.g. NICE)
5. Increase Pharmac budget c/w other OECD nations

Acknowledgments

- Views are our own
- Do not represent Medicines New Zealand
- Do not represent Patient Voice Aotearoa
- Thanks to Mark Blackham (Blackland PR)