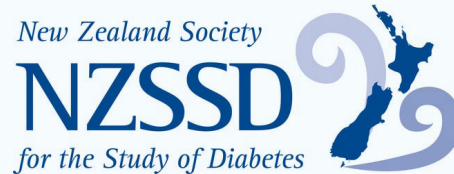


OUTTAKES

NEW ZEALAND SOCIETY FOR THE STUDY OF DIABETES (NZSSD) CONFERENCE

2-4 MAY 2024

Among the many things PCRG gathered from attending NZSSD's annual conference last week, a few things stood out at 'key takeaways' (from our point of view). Some of these key points were offered by [Professor David O'Neal](#), Director Diabetes Technology Research Group at the University of Melbourne and Senior Endocrinologist St Vincent's Hospital Melbourne.



New Zealand Society
NZSSD
for the Study of Diabetes

New Zealand presents a microcosm of the growing global impact of diabetes. Here 1 in every 37 families is impacted by Type 1 diabetes; 25% of which are Māori or Pacific ethnicity which can be seen as a corollary for other indigenous populations.

Continuous Glucose Monitoring (CGM) devices offer patients a convenient way to easily and quickly monitor glucose levels in the blood (without finger sticks) as well as help avert potential emergency events like hypoglycemia.

In sharing his research, Professor O'Neal demonstrated improved physical health outcomes of patients using CGM monitoring combined with insulin pumps.

Moreover, his research spotlighted the improved emotional wellbeing for the participants involved in these trials.

The Big Question:

Patient uptake of new technologies in chronic disease presents its own unique challenges for every provider. Success starts with explaining proper use and outcomes from new methods (like technology). Professor O'Neal presented the big question: how to transition patients to the use of new technologies to better ensure their safety?



It's a question heard around the world especially considering high-risk populations. Like Māori in NZ, diabetes strikes Asian and Pacific Islander children at disproportionately higher rates followed by Caucasians, Hispanics and African Americans according to America's [Centers for Disease Control and Prevention](#). Between 2002 and 2018, the incidence of Type 1 diabetes increased dramatically.

Professor O'Neal provided insights and practical tips on how to transition patients to the use of new technologies.

For starters, selecting the best type of devices for patients is critical to overall success.

Prioritising high risk patients (those who have the most to gain) is another step. However, this cohort also provides challenges especially when it comes to adoption. It's not just introducing new technology but explaining how to use it; how to read it and what kind of action to take based on the information provided that leads to improved outcomes. This is a multi-dimensional process designed to ensure safety when orientating patients to new technologies. This introduction needs to be followed by close monitoring and follow-up in the initial stages of patients using these new devices.

Finally, deploying CGM as a way to monitor and provide health professionals with detailed reports on a patients glycemic control 24 hours a day, Professor O'Neal encouraged teaching patients how to understand these reports to further their understanding and management of their disease.



Technology's "New Tricks" (Make it local to get it adopted)

Following Professor O'Neal, two researchers presented separate studies focused on health care delivery for Māori in New Zealand:

[@Solita Donnelly](#) from [Aotearoa Diabetes Collective](#) and [@Rebekah Crosswell](#) from the University of Waikato explored different ways of delivering health care particularly among Māori.

Their research demonstrated improved health outcomes can be achieved when locally relevant resources are made available at a place and time that is embedded in their community. These types of health delivery models can overcome previously recognised barriers to access for healthcare. The utilisation of whanau (family) support was recognized as key to achieving success when delivering health services and education.

The presentations challenged traditional health delivery models for Māori by showing improved health outcomes for people living with Diabetes are provided in the community by people who are engaged with those communities. Meaning the right delivery can make all the difference.

It's important to view this through the wider lens for Indigenous peoples and at-risk communities globally.

When viewed through the broader global lens, it seems that technology has made brilliant strides in the treatment of diabetes. But this may only be effective when properly implemented and that requires a more in-depth understanding of the patient and their community.

The challenge for NZ health practitioners and diabetes practitioners globally was clearly set during this conference. We know who needs this technology but delivering it to the right people in a safe and effective manner becomes a paramount concern.

PCRG has fielded clinical research on behalf of leading diabetes device manufacturers and New Zealand presents an ideal environment for these studies. The demographics, centers of excellence and investigators offer device makers a rich opportunity. We're here to help.