

**THE ENDOCRINE SOCIETY AND AVALERE EXPERTS PUBLISH FINDINGS ON
HYPOGLYCEMIA PREVENTION IN TYPE 2 DIABETES PATIENTS**

The findings, published in The Journal of Endocrinology & Metabolism, will guide a pilot study to assess interventions to improve the identification and management of diabetes patients at high risk for hypoglycemia.

Hypoglycemia, a complication of Type 2 Diabetes (T2D) caused by too much insulin and sulfonylurea use, has been identified as one of the top three preventable Adverse Drug Events by the U.S. Department of Health and Human Services. The condition significantly impacts a person's quality of life, social life, work productivity, and ability to drive safely. In 2009, more serious cases of hypoglycemia resulted in nearly 300,000 emergency room visits of adult patients with T1D or T2D. For Medicare beneficiaries in 2010, hospitalization resulting from hypoglycemia was associated with risk-adjusted 30-day readmission and 30-day mortality rates of 18.1% and 5%, respectively.

In response to the prevalence and high burden of disease, especially among adults aged 65 years and older, the Endocrine Society is collaborating with Avalere to design and implement the Hypoglycemia Prevention Initiative, a pilot study that will assess interventions for improving earlier identification and management of hypoglycemia in high-risk patients with T2D.

As part of this collaboration, the Society's Robert Lash, M.D., Chief Professional and Clinical Affairs Officer, and Avalere experts Deborah Lucas, Vice President, Judit Illes, Manager, Lauren Cricchi, Senior Associate, and Morenike Ayo-Vaughan, Senior Associate, conducted an environmental scan to understand clinical guidance documents, clinical tools, quality measures, and quality improvement initiatives related to hypoglycemia and T2D.

The review of over 750 articles yielded several key findings:

- The majority of patients with T2D are treated in primary care settings. Thus, primary care providers play an important role in identifying and managing patients at high-risk of hypoglycemia.
- There are significant challenges in translating updated clinical practice guideline recommendations into practice for hypoglycemia; various national initiatives are generating best practices in support of guideline-concordant care.
- A few risk assessment tools and a variety of educational resources exist to support clinicians and patients in reducing patients' risk for hypoglycemia.
- Engaging patients in shared decision-making and discussions around their individualized glycemic goals can lead to improved medical management.



These findings confirm an urgent need to address key gaps in evidence around effective strategies for reducing hypoglycemia in patients with T2D. Through the Hypoglycemia Prevention Initiative, the Society and Avalere have a unique opportunity to increase hypoglycemia awareness among providers and patients, and ultimately, improve diabetes care.

The Society and Avalere's paper in The Journal of Endocrinology & Metabolism can be found [here](#).

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