Cost-Effectiveness in T2D

HAMZA ALSHANNAQ, GREGORY NORMAN, PETER LYNCH





In the United States, diabetes and its complications resulted in a total cost of \$412.9 billion in 2022



Aim

To investigate the cost-effectiveness of rtCGM from a US payer perspective



Study Design

- US retrospective study
- IQVIA Core Diabetes Model version 10.0



Primary Outcomes

- Cost effectiveness of CGM
- Diabetes-related acute events and micro- and macrovascular complications

Study Population

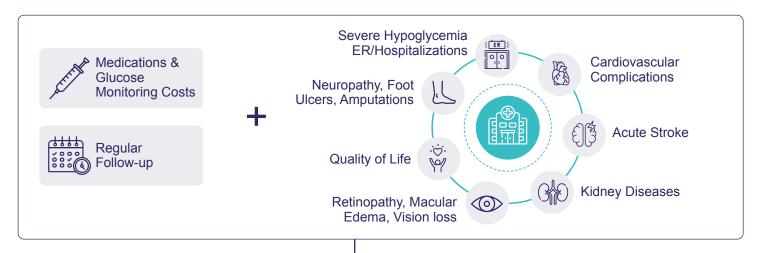
Participants: (N=36,080)



Clinical data sourced from a large US retrospective study, including people with **T2D receiving insulin therapy**

Results

rtCGM Demonstrated Economic Value by Reducing Disease Burden and Total Costs



The relative reduction in the total number of events due to rt-CGM use for diabetes eye, renal, neuropathy, and cardiovascular complications was 17.0%, 20.0%, 8.7%, and 2.4%, respectively.

Avoidance of Eye and Renal Complications Were Realized After Only 6 Patients Used rtCGM

Projected Clinical Outcomes	Cumulative Incidence (%)		Relative Risk	Number Needed
	RT-CGM	SMBG	(vs SMBG)	to Treat (NNT)
Total Eye Complications	86.55	104.26	0.83	6
Total Renal Complications	63.19	79.01	0.80	6

Key Takeaways for Managed Care Decision Makers



✓ rtCGM is a cost-effective technology for managing insulin-treated T2D. It is associated with increased. lifespan, more healthy life years, reduced acute diabetes events, and fewer micro- and macrovascular complications, with projected lifetime cost savings per patient of approximately \$7,555.