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TITLE: The Fourth Annual Clinical Diabetes Technology Meeting

PRINCIPAL INVESTIGATOR: David C. Klonoff

CONTRACTING ORGANIZATION: Diabetes Technology Society
Foster City, CA  94404

REPORT DATE: September 2008

TYPE OF REPORT: Final Proceedings

PREPARED FOR: U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland  21702-5012

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**REPORT DOCUMENTATION PAGE**

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**Standard Form 298 (Rev. 8-98)**

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POST MEETING REPORT
FOURTH ANNUAL CLINICAL DIABETES TECHNOLOGY MEETING
APRIL 11-12, 2008
ORLANDO, FLORIDA

The Fourth Annual Clinical Diabetes Technology Meeting was presented by the Diabetes Technology Society at the Orlando, Florida, Hyatt Regency Hotel on April 11-12, 2008. The first day covered Technologies for Diabetes Monitoring and the second day covered Technologies for Diabetes Therapy.

On April 11, 2008, which was the Technologies for Diabetes Monitoring day, the first presentation was made by Barry Ginsberg, M.D., Ph.D., on the topic, "Self-Monitoring of Blood Glucose." He explained the use of self monitoring of blood glucose for clinical decision making and addressed issues with glucose monitoring, including common user errors that can interfere with accuracy.

Howard Wolpert, M.D., presented an overview of Continuous Glucose Monitoring (CGM) technology. He described how metabolic monitoring with continuous glucose monitoring can provide information about nutritional and metabolic status that is unavailable with spot glucose testing.

Jennifer Block, R.N., CDE, discussed the concept of CGM as a behavior modification tool. She explained how, to modify eating habits and exercise habits based on CGM and also achieve improved medication compliance with CGM. She discussed how with CGM, patients must confront seeing all of their glucose readings demonstrated for days at a time, and she referred to this phenomenon as “naked diabetes.”

Darrell Wilson, M.D., discussed glycemic variability. He pointed out how useful it can be to utilize the data provided by continuous glucose monitoring to determine therapy of diabetes. He provided examples of glycemic patterns that can be discerned through this monitoring technology.

Bruce Buckingham, M.D., gave a live demonstration on the “Interpretation of Continuous Glucose Data.” He presented case study examples of how continuous glucose monitoring can provide insight into patient behavior and assist in determining drug and diet therapy.
He described strategies for modifying insulin dosages and timing to improve control, as measured by CGM.

Jill Abelseth, M.D., described the policies of reimbursement for continuous glucose monitoring through her experience with government payers and insurance payers for determining coding, coverage, and payment for new monitoring technologies, such as continuous glucose monitoring devices. She emphasized the need for physicians to communicate with these payers to effect establishment of favorable policies for the use and reimbursement of these new technologies.

John Buse, M.D., Ph.D., presented an update on A1C and mean blood glucose reporting. He described how Hemoglobin A1C and mean glucose levels correlate and explained why the concept of mean blood glucose was developed.

Lois Jovanovic, M.D., discussed technology for monitoring and managing diabetes in pregnancy. She demonstrated that there is a need for detection of diabetes in women of childbearing years and how controlled insulin delivery and the use of CGM promotes optimal maternal and fetal health during pregnancy with diabetes.

Michael Rocco, M.D., explained how to select noninvasive cardiovascular imaging tests for patients with diabetes. He described how noninvasive testing measures cardiac structure and function, as well as how to determine which patients with diabetes require noninvasive CV testing. He described a variety of emerging imaging technologies.

LTC Tom Sauerwein, M.D., FACE, spoke on the topic of “Establishing an Electronic Medical Record (EMR) for a Diabetes Clinic.” He described how EMR can lead to improved outcomes for patients with diabetes. He also explained how EMR can lead to improved recruiting for research trials.

In this session, entitled "Patient Panel: Living with Continuous Glucose Monitoring," five patients who used three different continuous glucose monitors, between them, discussed benefits and drawbacks of having access to real-time glucose values and how this technology has improved their glycemic control. The patients (and one mother of a child panelist) were interviewed by the panel moderators, Paula Jameson, M.S.N., ARNP, and Irina Nayberg, R.N.
On April 12, 2008, which was the Technologies for Diabetes Therapy day, the first presentation was made by G. Alexander Fleming, M.D. on “Thiazolidinedione Therapy.” He explained what went right and what went wrong with this family of drugs from a regulatory perspective. He explained how the mechanism of action of these drugs led not only to improved glycemic control, but to clinically significant congestive heart failure and clinically significant anemia, as well as even coronary artery disease.

Alan Garber, M.D., Ph.D., FACE, presented a lecture on “Incretin Therapy vs. DPP4 Inhibitor Therapy.” He covered mechanisms of action of Incretin hormones and DPP-4 agonists, side effects of these drugs, and how patients can benefit from thiazolidinediones and DPP-4 agonists.

Lawrence Blonde, M.D., FACP, FACE, explained when and how to initiate insulin therapy in type 2 diabetes. He explained the use of short-acting pre-meal dosing as well as long-acting basal insulin.

Jeffrey Joseph, D.O., and Curtiss Cook, M.D., FACE, spoke on “Hospital Management of Diabetes.” They explained the need for intensive glycemic control in hospital patients. They explained that hyperglycemia may precede or become part of a hospitalization as a stress response. They supported that clinical outcomes are adversely affected by hyperglycemia.


Lori Laffel, M.D., discussed insulin pumps in the schools. She began her talk with statistics associated with pumps used in the pediatric population, continued with conditions and needs of the school nurse, and ended with explaining the need for additional training to understand patient’s needs and pumps.

Curtiss Cook, M.D., FACE presented on insulin pumps in the hospital, illustrating his presentation with case studies of pumps in the hospital and how self-management of pumps can be effective in the hospital under controlled conditions.

Bruce Bode, M.D., FACE, opened his presentation with engaging audience response questions about clinicians and downloading pump information, and then went on to
presenting various meters, pumps and available software choices. He also presented data about the performance of Glucommander software for hospital management of hyperglycemia.

Stuart Weinzimer, M.D., addressed the practical considerations of sensor augmented pump therapy and engaged the audience by using the audience response system to explore the question, “How do we use pumps and sensors?” He included challenges and benefits of utilizing continuous glucose monitors linked to insulin delivery systems.

Ruth Weinstock, M.D., presented an overview of telemedicine for managing diabetes. With a short video, she illustrated a case of remote use of telemedicine for a non-ambulatory patient. She stated that considerations in the use of telemedicine include data entry, accurate transmission, securely controlled access, auditing capability, reliability, stability, and cost of equipment. Also, she pointed out how the internet has been used in diabetes education and how telemedicine has been used in correctional facilities.

Tim Wysocki, Ph.D., ABPP, spoke on “Children with Diabetes — Strategies to Increase Compliance.” From his research and experience as a psychologist, he presented case study statistics and behavioral interventions on the presentation topic and emphasized the benefits of motivational interviewing.

Robert Gabbay, M.D., Ph.D., began his presentation on “Adults with Diabetes — Strategies to Increase Compliance” by using the audience response system to engage the clinicians with questions as to how they teach patients. In his talk he presented the idea of motivational interviewing and the website www.motivationainterviewing.org for practical suggestions such as using open ended questions, and commenting with statements resembling “It sounds like…” or “you mean that…” or “you’re wondering if…” or “so you feel…” The meeting concluded with a panel discussion on the future of diabetes technologies. This panel of technology experts, which included Bruce Bode, M.D., FACE, Jeffrey Joseph, D.O., Lori Laffel, M.D., and Stuart Weinzimer, M.D., fielded questions from the audience. Topics included: making devices smaller, utilization of algorithms for insulin dosing, closed-loop development, alarms that sound in other rooms, further development of tight glucose monitoring in hospitals, continuous glucose monitors, intravascular glucose monitors, and the future of telemedicine.
During the meeting, the speakers asked questions to the audience about their preferences for treatments. The questions were then answered and the results were tabulated in real time. A sample of these questions and the audience responses are contained in figures 1-8.
The conclusions of the meeting speakers and organizers were that: 1) technology is contributing to better devices for monitoring diabetes; 2) technology is contributing to better drug delivery systems for treating diabetes; and 3) technology will improve outcomes in diabetes and other diseases requiring ongoing monitoring and therapy.
Fourth Annual
CLINICAL DIABETES TECHNOLOGY MEETING
A PRACTICAL COURSE FOR CLINICIANS TAUGHT BY CLINICIANS

Technologies for Diabetes Monitoring and Therapy

Hyatt Regency
Orlando International Airport

Presented by:
DIABETES TECHNOLOGY SOCIETY
Applying science and engineering to fight diabetes

Developed in cooperation with:
- Yale University, Department of Pediatrics
- Stanford University, Department of Pediatrics
- UCSF Diabetes Center
- Pennsylvania State University, Department of Medicine
- Barbara Davis Center for Childhood Diabetes/University of Colorado
- US Army
- Mills-Peninsula Health Services

Meeting supported by educational grants from:
- Abbott Diabetes Care
- Amylin-Lilly
- Bayer Healthcare, Diabetes Care
- Becton, Dickinson and Company
- LifeScan, Inc.
- Medtronic Diabetes
- Merck & Co., Inc.
- Novo Nordisk A/S

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- Satish Garg, MD
  Departments of Pediatrics and Medicine, Barbara Davis Center for Childhood Diabetes, University of Colorado, Aurora, Colorado
- Stephen Gitelman, MD
  Department of Pediatrics, University of California at San Francisco, San Francisco, California
- Jeffrey Joseph, DO
  Artificial Pancreas Center and Department of Anesthesiology, Thomas Jefferson University, Philadelphia, Pennsylvania
- Robert Vigersky, MD
  Diabetes Institute, Walter Reed Army Medical Center, Washington, DC
- Stuart Weinzimer, MD
  Department of Pediatrics, Yale University, New Haven, Connecticut
- Darrell Wilson, MD
  Department of Pediatrics, Stanford University, Palo Alto, California
- Howard A. Wolpert, MD
  Joslin Diabetes Center, Harvard University, Boston, Massachusetts

Diabetes Technology Society
www.clinicaldiabetesotechnology.org
FRIDAY, APRIL 11, 2008
Technologies for Diabetes Monitoring

08:00  Welcome: First Day
       David Klonoff, MD, FACP
       Mills-Peninsula Health Services, San Mateo, California and
       UCSF, San Francisco, California

08:05  Self-Monitoring of Blood Glucose
       Barry Ginsberg, MD, PhD
       Diabetes Technology Consultants, Wyckoff, New Jersey

08:45  Overview of Continuous Glucose Monitoring Technology
       Howard Wolpert, MD
       Joslin Diabetes Center, Harvard University, Boston, Massachusetts

09:25  Continuous Glucose Monitoring as a Behavior Modification Tool
       Jennifer Block, RN, CDE
       Stanford University, Palo Alto, California

10:05  Break (refreshments provided)

10:30  Glycemic Variability
       Darrell Wilson, MD
       Stanford University, Palo Alto, California

11:10  Live Demonstration of Interpretation of Continuous Glucose Data
       Bruce Buckingham, MD
       Stanford University, Palo Alto, California

11:50  Reimbursement for Continuous Glucose Monitoring
       Jill Abelseth, MD
       Endocrine Group, Albany, New York

12:30  Lunch (provided)

13:40  Update on A1C and Mean Blood Glucose Reporting
       John Buse, MD, PhD, CDE, FACE
       University of North Carolina, Chapel Hill, North Carolina

14:20  Technology for Monitoring and Managing Pregnancy in Diabetes
       Lois Jovanovic, MD
       Sansum Diabetes Research Institute, Santa Barbara, California

15:00  How to Select Noninvasive Cardiovascular Imaging Tests
       Michael Rocco, MD
       Cleveland Clinic, Cleveland, Ohio

15:40  Break (refreshments provided)

16:05  Establishing an Electronic Medical Record for a Diabetes Clinic
       LTC Tom Sauerwein, MD, FACE
       US Air Force, Wilford Hall, San Antonio, Texas

16:45  Patient Panel: Living With Continuous Glucose Monitoring
       Paula Jameson, MSN, ARNP
       Nemours Children's Clinic, Orlando, Florida
       Irina Naimberg, RN
       Mills-Peninsula Health Services, San Mateo, California

17:45  Adjourn
SUNDAY, APRIL 12, 2008

Technologies for Diabetes Therapy

08:00 Welcome: Second Day
David Klonoff, MD, FACP
Mills-Peninsula Health Services, San Mateo, California and UCSF, San Francisco, California

MEDICAL MANAGEMENT OF TYPE 2 DIABETES

08:05 Thiazolidinedione Therapy: What Went Right and What Went Wrong?
G. Alexander Fleming, MD
Kinexum LLC, Harper’s Ferry, West Virginia

08:25 Incretin Therapy vs. DPP4 Inhibitor Therapy
Alan Garber, MD, PhD, FACE
Baylor College of Medicine, Houston, Texas

08:45 When and How to Initiate Insulin Therapy in Type 2 Diabetes
Lawrence Blonde, MD, FACP, FACE
Ochsner Clinic Foundation, New Orleans, Louisiana

09:05 Panel Discussion
Lawrence Blonde, MD, FACP, FACE
Ochsner Clinic Foundation, New Orleans, Louisiana

Alan Garber, MD, PhD, FACE
Baylor College of Medicine, Houston, Texas

G. Alexander Fleming, MD
Kinexum LLC, Harper’s Ferry, West Virginia

10:05 Break (refreshments provided)

10:30 Pens, Pumps, and Dosing Software: The Latest Devices
Linda Schrock, RN, BC-ADM, CDE
Elkhart General Hospital, Elkhart, Indiana

Paula Jameson, MSN, ARNP
Nemours Children’s Clinic, Orlando, Florida

11:10 Insulin Pumps in the Schools and the Hospital
Lori Laffel, MD
Joslin Diabetes Center, Harvard University, Boston, Massachusetts

Curtiss Cook, MD, FACE
Mayo Clinic, Scottsdale, Arizona

11:50 Software for Diabetes
Bruce Bode, MD, FACE
Atlanta Diabetes Associates, Atlanta, Georgia

12:30 Lunch (provided)

13:40 Sensor Augmented Pump Therapy: Practical Considerations
Stuart Weinzimer, MD
Yale University, New Haven, Connecticut

14:20 Telemedicine for Managing Diabetes
Ruth Weinstock, MD
SUNY, Upstate Medical University, Syracuse, New York

15:00 Break (refreshments provided)

MOTIVATING STRATEGIES TO INCREASE PATIENT COMPLIANCE WITH DIABETES THERAPY

15:25 Children with Diabetes – Strategies to Increase Compliance
Tim Wysocki, PhD, ABPP
Nemours Children’s Clinic, Jacksonville, Florida

16:05 Adults with Diabetes – Strategies to Increase Compliance
Robert Gabbay, MD, PhD
Pennsylvania State University, Hershey, Pennsylvania

16:45 Future of Diabetes Technology: Panel Discussion
Bruce Bode, MD, FACE
Atlanta Diabetes Associates, Atlanta, Georgia

Lori Laffel, MD
Joslin Diabetes Center, Harvard University, Boston, Massachusetts

Jeffrey Joseph, DO
Thomas Jefferson University, Philadelphia, Pennsylvania

Stuart Weinzimer, MD
Yale University, New Haven, Connecticut

17:45 Adjourn
Eighth Annual
DIABETES TECHNOLOGY MEETING
Applying science and engineering to fight diabetes

November 13 - 15, 2008
Marriott Bethesda Hotel

Presented by DIABETES TECHNOLOGY SOCIETY
www.diabetestechology.org

PRE-MEETING WORKSHOPS
- Intellectual Property for Diabetes Technology
  Balancing the interests of inventors, developers, manufacturers, and investors
- Technology to Assess Diet and Exercise
  Measuring calories in and out
- Noninvasive Glucose Monitoring
  Measuring glucose optically
- Diabetes Information Management
  Transmitting, storing, and analyzing data to improve care

MEETING TOPICS
- Technologies for Metabolic Monitoring
  New methods for measuring glucose and markers of glycemic control
- Nanotechnology for Glucose Sensors
  Measuring glucose on a small scale
- Artificial Pancreas
  Including automatic glucose sensors, insulin delivery systems, and feedback control
- Insulin Delivery Technology
  Novel methods for avoiding painful needle injections
- Tissue Engineering for Insulin Production
  Nurturing islet cells to function in an abiotic environment
- Technologies for Improving Compliance
  With Diabetes Therapy
  How to inspire patients to actually use the technology

PROGRAM HIGHLIGHTS
- Two Poster Sessions
  Posters will be presented during two evening receptions on October 25, 2007 and October 26, 2007
- Annual Diabetes Technology Survey
  Results will be presented and discussed in real-time throughout
  the meeting
- Live Demonstrations

ABSTRACT SUBMISSION
- Deadline to submit: July 03, 2008
- For information on how to submit an Abstract go to:
  www.diabetestechology.org
- Abstracts will be published in Journal of Diabetes Science and Technology, distributed to all meeting attendees,
  and considered for oral and poster presentation.

PETERSON STUDENT RESEARCH AWARDS
- Gold $1000 / Silver $500 / Bronze $300
- Also includes travel, lodging, and registration for best 3
  Diabetes Technology Abstracts first-authored by students

IN COOPERATION WITH
- Centers for Disease Control and Prevention
- US Army
- UC Berkeley Department of Bioengineering
- Georgia Tech/Emory Center for the Engineering of Living Tissues
- Mills-Peninsula Health Services
- Journal of Diabetes Science and Technology

PLANNING COMMITTEE
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- Carol Herman, RN, Food and Drug Administration, Rockville, Maryland
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