Dexcom®
CONTINUOUS GLUCOSE MONITORING

The GOLD Study[1]

A second study published in JAMA demonstrating Dexcom Continuous Glucose Monitoring (CGM) System* use benefits patients on multiple daily injections (MDI).

In addition to the DIaMonD study, the GOLD study presents convincing evidence of glycaemic improvements in patients on MDI therapy and is the first major study to show improvements in key quality of life measures.

HbA1c Reduction

Reduction of Time in Hypo- and Hyperglycaemia

Improved Quality of Life

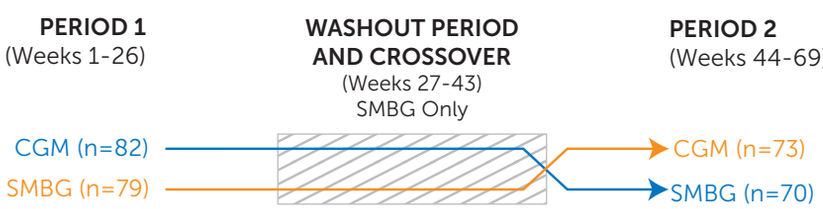
* Study used Dexcom G4 PLATINUM System with 505 Algorithm.

Study Objective & Methods

Objective:
Evaluate impact of CGM use on HbA1c (primary endpoint) and other measures of glycaemic control, as well as quallity of life in adults with Type 1 Diabetes on MDI insulin therapy:

- *HbA1c reduction*
- *Time in hypo-/hyperglycaemia*
- *Quality of life improvements*

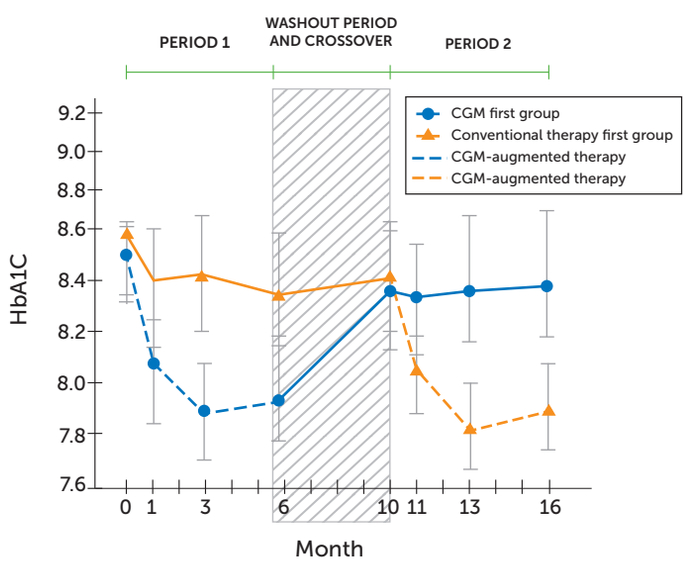
Research Design/Methods:
69-week crossover randomised clinical trial of 161 adult patients on MDI insulin therapy with Type 1 Diabetes (ages ≥ 18 years) split into Dexcom CGM use or self-monitoring of blood glucose (SMBG) groups; 17-week washout period with SMBG only for all participants; no HbA1c upper limit exclusion.



Results

HbA1c Reduction

Primary Outcome:
Study participants using CGM showed a mean **.43% HbA1c reduction** compared to SMBG [p-value < .001]. A reduction of 0.3% is considered a clinically meaningful improvement to reduce long-term complications from diabetes.[2]



The GOLD Study[1]

Improvements of Glycaemic Outcomes

Secondary HbA1c Outcome:
Three times as many patients on the Dexcom CGM-augmented therapy showed an average of a >1.0% HbA1c reduction compared to patients in the conventional therapy group.

3x
As many Dexcom CGM Users

>1.0%
HbA1c Reduction

Reduction of Time in Hypo- and Hyperglycaemia

- *58% decrease of average time spent in hypoglycaemia with Dexcom CGM use*
- *16% reduction of average time (50 mins/day) in hyperglycaemia(>13.9 mmol/L)*

80% Decrease
in severe hypoglycaemia events with CGM therapy†

†Defined as requiring assistance from another person or resulting in unconsciousness

Improvements in Quality of Life

Greater Treatment Satisfaction and Overall Well-Being Reported with Dexcom CGM Use

- *Participants showed an average of 13% improvement in treatment satisfaction when their MDI regimen was augmented by Dexcom CGM vs. standard care (SMBG) alone.*
- *Participants reported greater overall well-being while using a Dexcom CGM System vs. SMBG.*

13%
Improvement in treatment satisfaction when adding Dexcom CGM to MDI regimen

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CGM use has been proven to both reduce HbA1c and decrease risk of hypoglycaemia regardless of delivery method.[3,4] When initiating or adjusting insulin regimens for your patients, CGM provides real-time insights for better glycaemic outcomes.

For more information on Dexcom Continuous Glucose Monitoring, please contact us on **1300 851 056** or at **diabetes@amsl.com.au**

amsldiabetes.com.au

amsl diabetes

References: **1.** Lind M, Polonsky, W, Hirsch, I, et al. Continuous Glucose Monitoring vs Conventional Therapy for Glycaemic Control in Adults With Type 1 Diabetes Treated With Multiple Daily Injections – The GOLD Randomised Clinical Trial. [published online January 24, 2017]. JAMA. **2.** Lind M, Odén A, Fahlén M, Eliasson B. A systematic review of HbA1c variables used in the study of diabetic complications. Diabetes & Metabolic Syndrome: Clinical Research & Reviews. 2008;2(4):282-293. **3.** Beck RW, Riddlesworth T, Ruedy K, et al. Effect of continuous glucose monitoring on glycaemic control in adults with type 1 diabetes using insulin injections: The diamond randomised clinical trial. JAMA. 2017;317(4):371-378. doi:10.1001/jama.2016.19975. **4.** Šoupal J, Petruželková L, Flekač M et al. Comparison of Different Treatment Modalities for Type 1 Diabetes, Including Sensor-Augmented Insulin Regimens, in 52 Weeks of Follow-Up: A COMISAIR Study. Diabetes Technology & Therapeutics. 2016;18(9):532-538. ARTG 169241. PR-100-259 August 2018