How did IME help improve care for people with T2D and obesity or overweight? Results from an IME impact study

This study illustrates a different and novel approach for demonstrating the impact of IME and its ability to accelerate evidence-based care in the management of people with type 2 diabetes (T2D) and overweight or obesity.

**Phase 1**
Baseline Survey
Assess educational needs of endocrinologists (N = 181) and PCPs (N = 350) in managing patients with T2D and overweight or obesity.

**Phase 2**
Education
Lilly Grant Office (LGO) supported IME aligned to addressing educational gaps.

**Phase 3**
Follow-up Survey
Assess impact of LGO-supported IME on closing educational gaps and identify what gaps remain among endocrinologists (N = 163) and PCPs (N = 325).

### Reported familiarity with emerging therapies and clinical trials for T2D therapies that promote weight loss (mean familiarity)

**Endo Learners vs. Non-learners**

<table>
<thead>
<tr>
<th>Category</th>
<th>2021 Endo (n = 181)</th>
<th>2022 Endo Non-learner (n = 105)</th>
<th>2022 Endo Learner (n = 57)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emerging therapies</td>
<td>1.6</td>
<td>2.1</td>
<td>2.6</td>
</tr>
<tr>
<td>Clinical trials</td>
<td>2.6</td>
<td>3.4</td>
<td>3.4</td>
</tr>
<tr>
<td>PCP</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Emerging therapies</td>
<td>1.3</td>
<td>2.0</td>
<td></td>
</tr>
<tr>
<td>Clinical trials</td>
<td>1.7</td>
<td>2.2</td>
<td></td>
</tr>
</tbody>
</table>

More Endo learners would address body weight at initial visit of a patient with T2D, obesity & other comorbidities

- **13% increase***
  - 75% of Endo learners
  - 79% of non-learners
  - 88% of PCPs

Learners target a greater % of body weight loss (>10% body weight) in managing weight loss for a patient with T2D and overweight or obesity

- **15% increase***
  - 14% of Endo learners
  - 18% of non-learners
  - 29% of PCPs

- **19% increase***
  - 24% of Endo learners
  - 27% of non-learners
  - 43% of PCPs

Non-learners are trialing diet, exercise, and behavioral modification longer before considering therapy that promotes weight loss in patients with T2D and overweight or obesity

- **17% increase***
  - Less than 3 months
  - 33% of Endo learners
  - 40% of non-learners
  - 50% of PCPs

  - ≥3 months
  - 66% of Endo learners
  - 60% of non-learners
  - 50% of PCPs

- **17% increase***
  - Less than 3 months
  - 15% of Endo learners
  - 22% of non-learners
  - 32% of PCPs

  - ≥3 months
  - 85% of Endo learners
  - 78% of non-learners
  - 68% of PCPs

Learners are more familiar with emerging therapies and clinical trials of therapies for managing T2D that promote weight loss than non-learners

- **13% increase***
  - *P = <.10

**CONCLUSION:**
Demonstrating outcomes across multiple programs is challenging. This innovative study demonstrates how IME is making a difference in healthcare provider (HCP) practice and patient care. The results show key areas where supported IME is impacting the adoption of evidence and enhancing management of T2D according to guidelines, including likelihood of HCPs to address weight at the initial visit of people with T2D, obesity or overweight, and numerous comorbidities; likelihood to set more aggressive weight loss goals for people with T2D; and familiarity with clinical trial data and emerging therapies for T2D that promote weight loss.

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