Integrated Personalised Diabetes Management drives improved patient reported outcomes

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Type 2 diabetes is a chronic condition associated with poor long-term outcomes including mortality. However, randomised controlled trials show that early glycaemic control leads to better outcomes, including a reduction in long-term macrovascular and microvascular complications. Despite good-quality evidence-based guidelines, glycaemic control has been shown to be inadequate globally with little improvement over the last decade. A number of barriers have been reported to implementation of evidence-based recommendations in clinical practice with including therapeutic inertia. One solution to improvement in outcomes has been integrated personalised diabetes management (iPDM) plans which offer a holistic personalised patient centred approach to management of diabetes. iPDM combines use of diabetes software with multiple automated data transfer with a two-way collaborative patient-health care professional communication and support for therapeutic decision-making and assessment of patient specific outcomes. Further research is required to integrate automated diverse data capture with patient reported outcome measures to make personalised care a reality for the future.