Interactive Education Increases Likelihood of Guideline-Based Incretin Therapy Prescribing in T2D

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1. Clinical Care Options.

Background

- Select incretin-based therapies are considered first-line or as early therapy for most patients with T2D with overweight/obesity due to significant weight loss efficacy
- Greater competence is needed on the actions and clinical applications of incretin-based therapies in people with T2D and overweight/obesity

Aim

- To determine the **impact of case-based education on knowledge, competence, and self-reported performance** among HCPs following participation in an educational activity on incretin therapies in T2D

Methods

- Throughout 2023, physicians, NPs, and PAs in primary care participated in either an in-person or live virtual interactive, case-based educational program
- Questions measuring **knowledge, competence, and performance** were asked at **baseline, immediately following the education, and 3 months after the education**

Conclusion

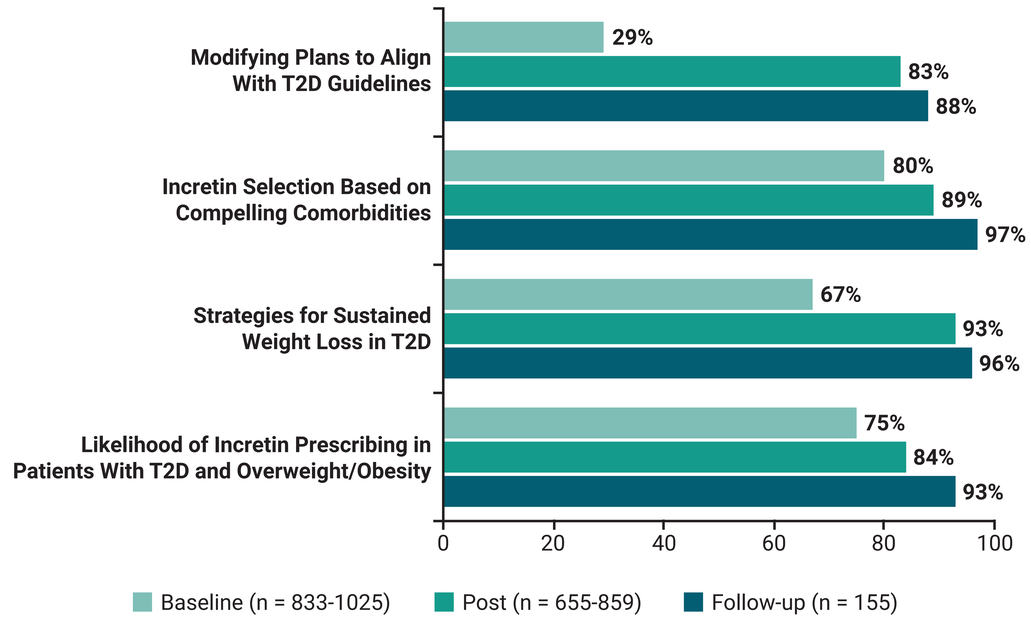
- **Case-based, interactive educational formats are effective strategies** for increasing primary care provider knowledge, competence, and self-reported performance regarding prioritizing therapies with dual benefits of glycemic control and weight loss for diabetes management

HCP, healthcare professional; NP, nurse practitioner; PA, physician associate; T2D, type 2 diabetes.

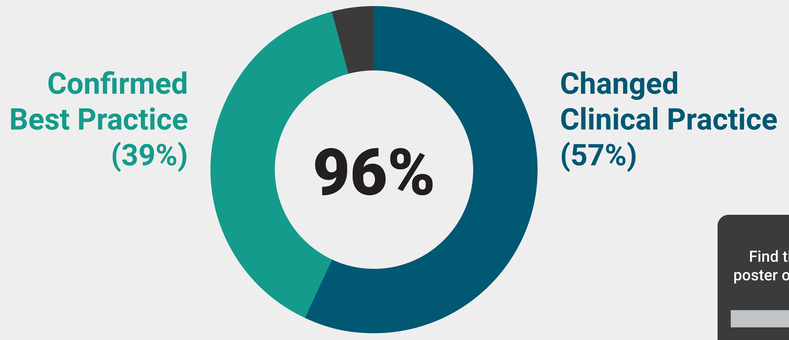
Supported by an educational grant from Lilly.

Interactive, Case-Based Education Increases HCP Likelihood of Guideline-Based GLP-1 RA Prescribing in Patients With T2D and Overweight/Obesity

Outcomes Assessment



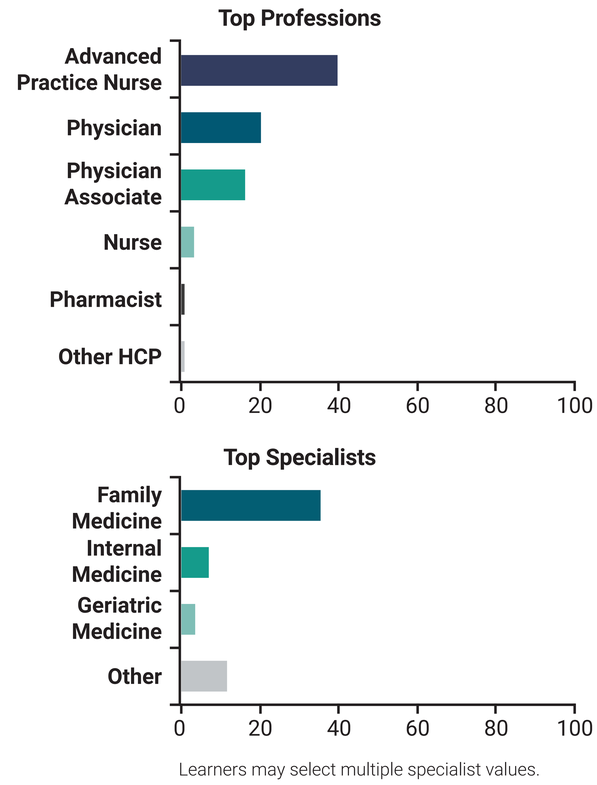
Education Impact on Practice



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Figures

Figure 1. 1889 learners interacted with program content.



Learners may select multiple specialist values.

Figure 2. Program's impact on patients.

24,352

Estimated No. of Patients Who Will Benefit



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