

REAL-WORLD CASE STUDY

Helping patients manage their diabetes.

The FreeStyle Libre 3 system helped Joe improve and maintain glycemic control, even with medication interruption





Patient History

- Newly diagnosed with T2D two weeks prior
- Experiencing hyperglycemia and blurry vision
- Adhering to a diet that he thought was healthy
- -Eating 6-8 meals/day and juicing

Baseline metrics and medications

HbA1c: **14.4**%

BMI: **35.67 kg/m**² Weight: **221 lbs.**

Medications: None

At first visit: prescribed metformin 500 mg qAM, semaglutide 0.25 mg qWK, and FreeStyle Libre 3 system



Patient case provided by Bhakti Paul, MD

Dr. Paul is a board-certified endocrinologist with an MPH in nutrition and is the Diabetes Director at Capital Family Medicine in Raleigh, NC. She focuses on managing type 2 diabetes through lifestyle intervention and seeks to help her patients employ non-pharmaceutical interventions for diabetes management.

This case study is intended to be used for educational purposes only. Individual symptoms, situations, and circumstances may vary.

BMI=Body mass index; qAM=Once a day in the morning; qWK=Weekly

Data on file. Abbott Diabetes Care.

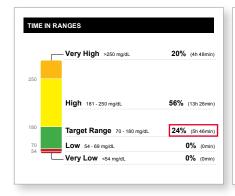
^{*}Actual patient information, although not the patient's real name or image.

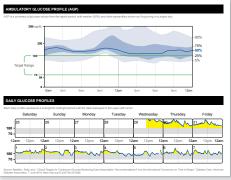
FIRST CGM REPORT

High glucose revealed the need for changes in diet, sleep, and medication regimen

AGP provides a complete glycemic profile to inform treatment decisions.

WEEK 1





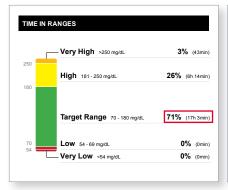
Clinician used remote monitoring of Joe's glucose levels to track progress

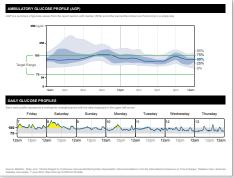
 Hyperglycemia reduction can be seen in the decreasing yellow areas in the Daily Glucose Profiles

Actual patient information.

Remote patient monitoring with LibreView* helped clinician see rapid progress and avoid intensifying therapy (i.e., added insulin).

2-WEEK FOLLOW-UP





Joe quickly made progress in glucose control from initiation

 Hyperglycemia observation in late night and early morning led to a conversation where Joe disclosed his inconsistent sleeping and large snacks before bed

Actual patient information.

Clinician and Joe identified problematic habits while reviewing the LibreView* report and developed therapy adjustments to reduce hyperglycemia.

Treatment plan

Adjust timing of medication (metformin) to be taken at night to better address morning glucose elevations

Change his diet to reduce carbs, snacking, and frequent eating

Adhere to a more consistent, earlier bedtime

AGP=Ambulatory Glucose Profile Data on file. Abbott Diabetes Care.

^{*}The LibreView data management software is intended for use by both patients and healthcare professionals to assist people with diabetes and their healthcare professionals in the review, analysis and evaluation of historical glucose meter data to support effective diabetes management. The LibreView software is not intended to provide treatment decisions or to be used as a substitute for professional healthcare advice.

FOLLOW-UP REPORTS

Demonstrated significant improvements with improved time in range

2.5-MONTH FOLLOW-UP

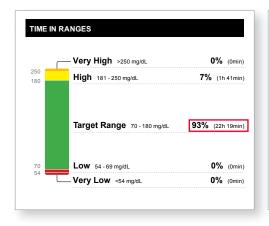
Achieved 100% time in target range.

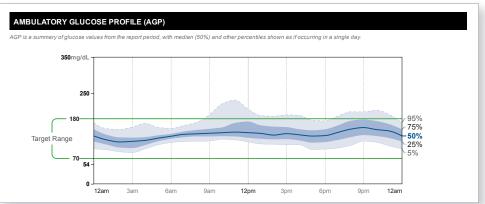
Reduced A1c from 14.4% to 7.1%.

"Without FreeStyle Libre systems it would be unlikely for him to have improved his glycemic control so quickly and without medication dose escalation."

- Dr. Paul

9-MONTH FOLLOW-UP





Actual patient information.

Joe was able to maintain glucose control even during the holidays and reduced his A1c to 6.1%*.



Data on file. Abbott Diabetes Care.

*Information obtained separately via lab test.

See last page for Important Safety Information.

MEDICATION DISRUPTION

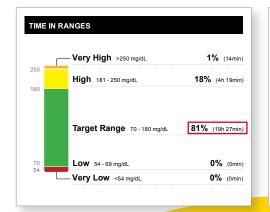
Maintained glycemic control even with GLP-1 interruption

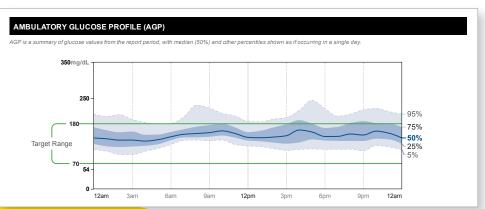
10-MONTH FOLLOW-UP

Joe learned to maintain his glucose without semaglutide*.

"With FreeStyle Libre systems, patients don't panic when their GLP-1 prescriptions are out of stock. They are able to course-correct with non-medication alternatives."

- Dr. Paul





Actual patient information.

KEY TAKEAWAYS

Real-life improvements



Maintained consistent glycemic control, even during challenging times



Changed his behavior, including diet, activity level, and timing of medication



Improved his lifestyle to stay healthy for his family

Clinical highlights

Quickly improved and maintained time in range

Reduced A1c by 8.3 points to 6.1%

Improved quality of life: significantly improved blurry vision

^{*}Joe lost access to semaglutide for two weeks.



FreeStyle Libre 3 Plus sensor.

Prescribe the latest sensor in the FreeStyle Libre 3 system

New prescriptions include:



Prescribe two FreeStyle Libre 3 Plus sensors (30-day supply, filled monthly; sensor refills: PRN or 11 additional refills [1-year supply]).

FreeStyle Libre 3 Plus sensors: NRC# 57599-0844-00 FreeStyle Libre 3 reader: NRC# 57599-0820-00

(Prescribe a reader if needed.)

Medicare patients/beneficiaries are eligible for the FreeStyle Libre 3 system*1

Start remote patient monitoring^{†‡} with LibreView[§] today at www.LibreView.com

Medicare and other third-party payor criteria apply.

*Patients must meet Medicare eligibility coverage criteria. †Glucose readings are not available during 1-hour warm-up, when sensor is too hot or too cold, when you see an error or "LO" or "HI" message, or no current glucose reading. ‡The user's device must have internet connectivity for glucose data to automatically upload to LibreView. §The LibreView data management software is intended for use by both patients and healthcare professionals to assist people with diabetes and their healthcare professionals in the review, analysis and evaluation of historical glucose meter data to support effective diabetes management. The LibreView software is not intended to provide treatment decisions or to be used as a substitute for professional healthcare advice.

1. CMS (2022). Accessed August 2024. https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33822.

IMPORTANT SAFETY INFORMATION

Failure to use FreeStyle Libre systems as instructed in labeling may result in missing a severe low or high glucose event and/or making a treatment decision, resulting in injury. If glucose reading and alarms (if enabled) do not match symptoms or expectations, use a fingerstick value from a blood glucose meter for treatment decisions. Seek medical attention when appropriate or contact Abbott at 855-632-8658 or https://www.freestyleprovider.abbott/us-en/safety-information.html for safety info.

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