Improvement of metabolic control and diabetes management in insulintreated patients results in substantial cost savings for the German Health System

K. Fritzen¹, B. Gutschek², B. Coucke³, K. Zakrzewska⁴, M. Hummel^{5,6}, O. Schnell^{1,6}

¹Sciarc Institute, Baierbrunn, Germany, ²Lifescan, Johnson & Johnson Medical GmbH, Neuss, Germany, ³Lifescan, Johnson & Johnson Medical GmbH, Zug, Switzerland,
⁵Diabetologische Schwerpunktpraxis Rosenheim, Rosenheim, Germany, ⁶Forschergruppe Diabetes e.V., Helmholtz Centre Munich, Munich-Neuherberg, Germany

Background and aims

Self-monitoring of blood glucose (SMBG) with a new blood glucose meter using the ColourSure[™] Technology to visualise target range was shown to improve metabolic control and overall diabetes-management of insulin-treated patients. Aim of this economic analysis was to identify cost savings for the German Health System resulting from an HbA1c reduction of 0.69% due to the utilisation of a user-friendly glucose meter with a colour range indicator.

Material & Methods

Baseline- and six month-patient data from an observational study on SMBG were used for risk evaluations using the UKPDS risk engine^{1,2} (Table 1). These values were integrated in an economic analysis regarding costs of myocardial infarctions (MI) related to diabetes for the German Health System^{3,4} (Table 2). Based on an earlier assessment we combined these calculations with a 10% reduction of severe hypoglycemic episodes³.

Table 1: Summary of Parameters Incorporated into the Analysis			
Insulin-treated patients in Germany	2.3 million		
Costs of MI			
Acute	€9,767		
Successfully treated MI	€13,799		
Hypothetical reduction in severe hypoglycemic events	10%		
Costs of severe hypoglycemia			
	6500		

Table 2: UKPDS risk engine calculations with patient data from observational study ^{1,2}				
8.68 %	7.99%			
139	139			
198 mg/dl	193 mg/dl			
46.4 mg/dl	46.8 mg/dl			
	k engine calcula bservational stu Baseline 8.68 % 139 198 mg/dl 46.4 mg/dl			

Ampulance	€520				
Hospitalization	€2,380	ΜΙ	24.7%	21.4%	
Average cost	€1,353	Fatal MI	18.1%	15.1%	

Results

An HbA1c reduction of 0.69% over six month was associated with a 3% decrease of MI in 10 years (Table 1). This decrease would lead to cost savings of \leq 4.90 per patient and year. Considering 2.3 million insulin-treated patients in Germany this 3% reduction of MI could result in annual savings of \leq 11.27 million. Combining the decrease of MI with a 10% reduction in hypoglycemic events³, these cost savings would increase to \leq 30.61 per patient and year or \leq 70.4 million for 2.3 million insulin-treated patients in Germany (Table 3).

Table 3: Cost Savings per Patient Related to an Improvement in HbA1c of 0.69 %					
Annual cost savings per patient					
Hypothetical reduction in severe hypoglycemic episodes	/	10%			
	/	€25.71			
3% reduction in fatal and nonfatal myocardial infarction	€4.90	€4.90			
In total	€4.90	€30.61			
Annual savings for the German health care system					
2.3 million insulin-treated patients	€11.28 million	€70.4 million			

Conclusion

The improvement of metabolic control and diabetes self-management which was achieved with the ColourSure[™] Technology has the potential to generate substantial cost savings for the German Health system underlining the importance of user-friendly methods for SMBG.

References

¹Schnell *et al.*, Impact on Diabetes Self-Management and Glycemic Control of a New Color-Based SMBG Meter. J Diabetes Sci Technol, 2017; ²Stevens *et al.*, The UKPDS risk engine: a model for the risk of coronary heart disease in Type II diabetes (UKPDS 56). Clin Sci, 2001; ³Schnell *et al.*, Higher accuracy of self-monitoring of blood glucose in insulin-treated patients in Germany: clinical and economical aspects. J Diabetes Sci Technol, 2013; ⁴Schnell & Erbach, Impact of a reduced error range of SMBG in insulin-treated patients in Germany. J Diabetes Sci Technol, 2014