

Automated insulin system improves glycemic control

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and 8.5 percent in the control group. During the six months of follow-up, the mean decrease in HbA1c from baseline was 1 percent in the [intervention group](#) and 0.3 percent in the [control group](#). The two groups were similar with regard to frequency of hypoglycemic events per month.

"Such a solution facilitated safe and effective insulin titration in a large group of patients with type 2 diabetes and now needs to be evaluated across large health care systems to confirm these findings and study cost-effectiveness," the authors write.

Several authors disclosed financial ties to Hygieia, which makes the d-Nav system.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

(HealthDay)—The combination of an automated guidance system for insulin titration and support from health care professionals is safe and is associated with significant improvements in glycemic control among patients with type 2 diabetes, according to a study published online Feb. 23 in *The Lancet*.

Richard M. Bergenstal, M.D., from the International Diabetes Center in Minneapolis, and colleagues randomly assigned 181 patients (aged 21 to 70 years) from three diabetes centers who had a glycated hemoglobin (HbA1c) concentration of 7.5 to 11 percent to either the d-Nav Insulin Guidance System and [health care](#) professional support (intervention group; 93 patients) or health care professional support alone (control group; 88 patients). Patients were contacted seven times during the study period (three face-to-face and four phone visits).

The researchers found that at baseline, mean HbA1c was 8.7 percent in the intervention group

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