

# Using a patient decision aid shared decision making for insulin initiation in patients with type 2 diabetes

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#### Background

Poor glycemic control in type 2 diabetes (T2D) is a global problem despite clear guidelines for T2D management. Patient involvement in the choice of intensify treatment regimens could improve adherence and optimize glycemic control. Shared decision-making (SDM) is receiving increased attention as a way to improve patient satisfaction and value of care.

## Figure 1- Flow diagram and allocation of participants to study groups



#### **Methods**

With the goal of enabling patient involvement in intensify treatment regimens decision making, we developed a decision aid "Do I Need Insulin?". The tool was designed for use by clinicians during the clinical encounter and describes a range of patient perspectives which emerge in the context of starting insulin for T2D in Taiwan's cultural setting. To evaluate the efficacy of this tool, we conducted a feasibility study using this tool for patients recommended to receive intensification therapy for glycemic control.

### Conclusions

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### Results

A total of 86 patients were enrolled, mean age 59.4 $\pm$ 1 years, diabetes duration of 10.6 $\pm$ 7.7 years. After the use of decision aid, 31 (36%) patients decide to receive insulin therapy, 55 (64%) patients decide to strengthen their lifestyle and not to undergo any treatment changes. For those who decided to receive insulin therapy, 21 (67.7%) has their A1c reduction of more than 0.5% at 3 months. Whereas, 15 (26.3%) for those without any treatment changes.

#### Figure 2- SDM auxiliary evaluation form

Patients receiving the decision aid found the tool more helpful; had improved knowledge; and had more involvement in making decisions about diabetes management. An innovative decision aid effectively involved patients with type 2 diabetes mellitus in decisions about their medications. Implementing a SDM model in a diabetes care practice is feasible and increases awareness and engagement, as well as satisfaction, among patients needed for need for therapy intensification.



#### **Relevance to HPH**

Clinical practice guidelines aim to improve the health of patients by guiding individual care in clinical settings. Many guidelines are beginning to support informed patient choice and suggest that clinicians and patients engage in shared discussions to determine how best to tailor treatment to individuals. The use of the SDM tool is one solution to bridge guidelines with clinical practice and provides a patient-centered approach, improve patient satisfaction with medical services, improve patient safety, and improve the quality of medical care.

**Keywords** Type 2 diabetes; therapy intensification; insulin therapy; shared decision making