



# **Consistent Engagement with a Digital Health Solution Enhances the Effect of** Medication Changes on Blood Glucose Control M. Dugas<sup>1</sup>, D. Hu<sup>1</sup>, M. Mudambi<sup>1</sup> K. Crowley<sup>1</sup>, A. K. Iyer<sup>2</sup>, M. Peeples<sup>2</sup>, M. Shomali<sup>2</sup>, A. Kumbara<sup>2</sup>, <sup>1</sup>Center for Health Information and Decision Setera University of Maryland, College Park weldoc\*

### **Background and Objectives**

- Pharmacologic management and patient self-management behaviors are both critical components of the successful care of people with Type 2 diabetes
- Changes to prescribed medications may reflect a clinician's judgment that a patient may currently be struggling with diabetes management
- Patient self-management behaviors may also be critical to realize the full benefits of medication changes
- This research explored:
  - Whether consistent engagement with a digital health solution that promotes healthy behavior may amplify the effects of medication changes on blood glucose (BG) control

#### **Digital Health Solution**

- The study used retrospective data from users of BlueStar®, an FDA-cleared digital health solution for Type 2 Diabetes
- BlueStar is a mobile and web platform that provides automated coaching messages (motivational, behavioral, and educational) to facilitate self monitoring of diabetes management based on real-time BG values and trends
- Users can log measures relevant to diabetes management such as BG readings, medication intake, exercise, sleep, and lab results, etc.





*Figure 1. Screenshots of the BlueStar app.* 

## <sup>2</sup>WellDoc Inc., Columbia, MD

### Methods

### Sample and Data

- Data from 252 active BlueStar users with Type 2 diabetes 3 months following initial activation
- Classified engagement into two groups: \* **Consistent Usage:** At least 1 entry per week for 12 consecutive weeks
  - Less Consistent Usage: Those who do not meet the condition for consistent usage but who have recorded monthly BG information
- Classified outcome as 'good' BG control (1) or not (0) \*
  - "Good" defined as average BG between 70 and 150 mg/dL in month 3

	No. of Less Consistent Users	No. of Consistent Users
Medication Change	26	73
No Medication Change	51	102
Total	77	175

#### Results

- \* medication changes and digital engagement
- Controlled for demographics and baseline BG control
- We were intrigued by a potential interaction between medication changes and frequency of engagement (b = 1.33, p = .07), and probed further
- When there were <u>no medication changes made</u>: month 3 (68.6% vs. 63.8%), b = -.03, p = .95

who recorded at least one BG measure per month during the

**Table 1.** Users are grouped /defined by their frequency of BlueStar use and medication change.

Performed multiple regression to test the interaction between

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\Box The consistent (n = 102) and less consistent users (n = 51)
were equally likely to have good blood glucose control at
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- \*



Figure 2. Proportion of Good BG control for the group with medication changes by engagement

- \*
- \* control
- medication class changes

### **Results Cont'd**

#### When medication changes were made:

The consistent users (n = 73) were significantly more likely to have good BG control at month 3 than that of less consistent users (n = 26), b = 1.35, p = .02

76.7% (n = 56) of consistent users with medication changes had good BG control compared to that of only 46.2% (n = 12) of less consistent users

### Conclusion

When medication changes are made for people with type 2 diabetes, consistent users of a digital health solution were more likely to have good blood glucose control at month 3 than that of less consistent users

Therefore, increased engagement with a digital health solution may amplify the effects of medication changes on BG

Future research can further explore the mechanisms underlying this finding including medication dose, timing, and