

## People with type 2 diabetes and healthcare professionals benefit from discussing the progressive nature of the condition: why and how?



We did a survey of

people with

Turkey and the US.

type 2 diabetes

healthcare

professionals • specialists (47%) • general practitioners (48%) • nurses (5%)\* in Brazil, China, Germany, India, Russia, Saudi Arabia,

Here we explore the differences our survey uncovered and the implications for improving diabetes conversations between HCPs and people with diabetes. \*Nurses only present in survey countries India, Germany and US

Our survey uncovered important differences in how people with type 2 diabetes and HCPs view

how diabetes and its treatments change over time. The survey was followed by a series of interviews

with a range of international experts to explore the findings and identify actionable change.

Key findings

# **72%**

diabetes can further build up this motivation. People with type 2 diabetes don't



of **HCPs** reported discussing the progression of diabetes with their patients,

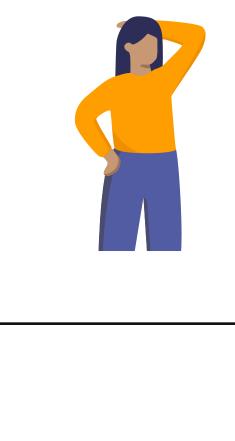
of people with type 2 diabetes recall having this conversation.

but only **67%** 

There were very few differences between the

in attitudes than we might have expected.

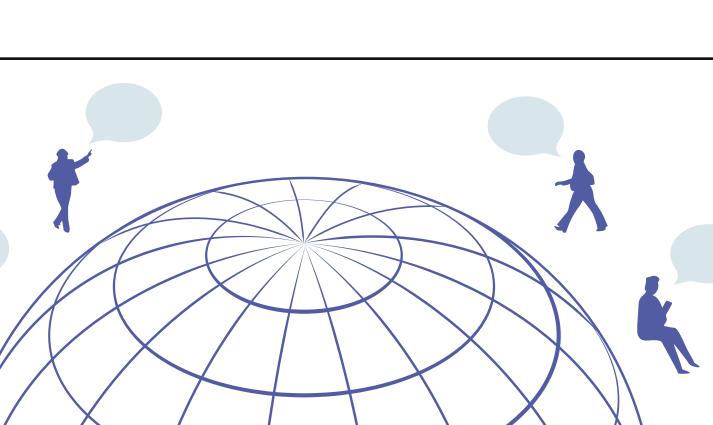
countries studied, suggesting more universality



50% of **HCPs** think that people with type 2 diabetes will feel nervous about starting a new treatment,

but only **40%** of people with type 2 diabetes report feeling nervous about

starting new treatments.



HCPs around the globe need to recognise the value of even brief discussions about how type 2 diabetes and its treatments change over time, also checking whether individuals have understood this information to make these conversations impactful.

Conversations explaining the changing nature of type 2 diabetes help individuals to

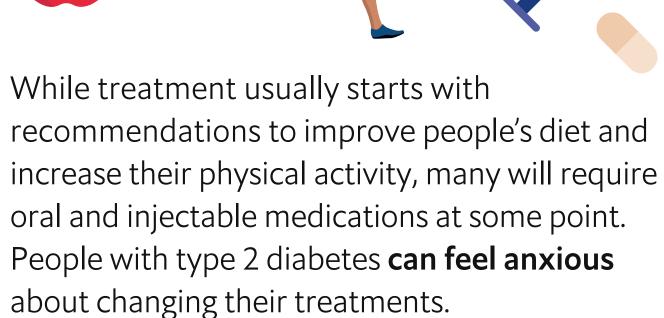
understand their condition and motivate them to act to slow its progression.

77% of individuals who have talked through

Type 2 diabetes is a progressive condition and being

motivator for people with Type 2 diabetes

able to delay the progression of diabetes is a powerful



This shows the important role that HCPs play in informing people about how their type 2 diabetes will evolve over time and how their treatment will change to reflect this.

### to slow the progression of their diabetes.

Percentage of respondents agreeing that taking more and/or stronger oral

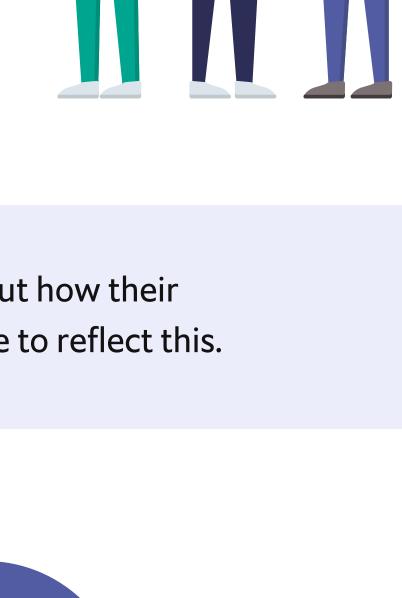
medication or insulin is a natural part of the progression of diabetes

the progressive nature

of diabetes with their

healthcare team were

more motivated to act



24%

"We have not discussed that

**50%** 

diabetes is progressive"

No conversation

38%

perceive treatment adjustments over time

that taking more/stronger medication is due to natural 62% 61% disease progression. This was similar whether people had a brief or more involved

Discussing the natural progression of diabetes

positively affects how people with type 2 diabetes

People with type 2 diabetes who reported being motivated to act to delay the progression of their

diabetes were more happy and

less nervous about starting new

treatments than those for whom

diabetes progression was not

a motivator.

conversation

with their HCP.

**HCPs** discussing how diabetes

changes over time results in

people with type 2 diabetes

being more likely to agree

"Happy"

"Nervous"

**Brief conversation** 

that diabetes changes

over time"

"We have briefly discussed

How respondents felt about about starting new treatments **54%** 41% Is diabetes progression

and feel more positively about changing treatments through conversations, however brief.

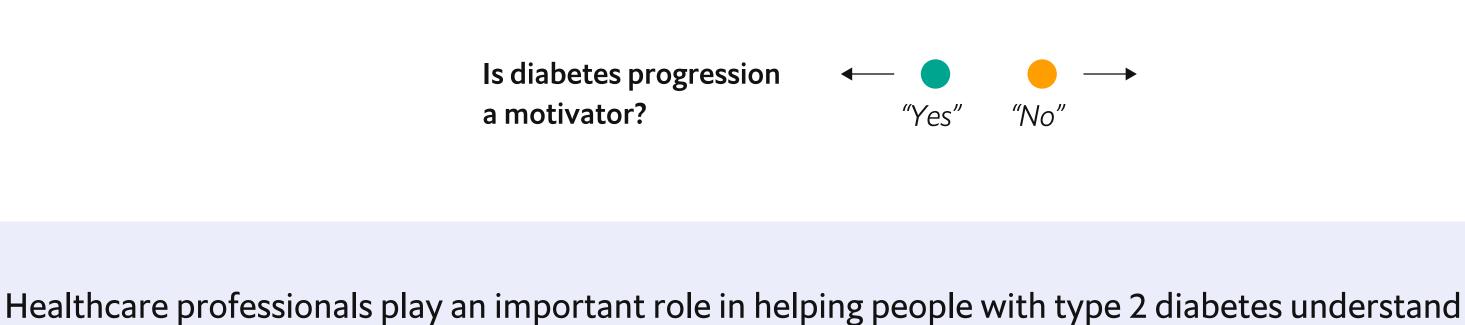
**Involved conversation** 

treatment might change

over time"

a motivator?

"We have discussed how my



But this perception was not people with type 2 diabetes accurate as fewer **people with** would be nervous about starting type 2 diabetes reported oral or injectable medication, nervous than HCPs estimated, and only a third would be happy and more of them were happy

"Happy"

"Nervous"

Healthcare professionals are overestimating individuals' fear about adjusting their treatment **HCPs perceived** that half of

31%

50%

about doing so.

HCPs can directly ask people with type 2 diabetes about how their attitude to changing treatments, rather than making assumptions that may be inaccurate. These feelings can then be addressed as part of on-going conversations providing information and support. Formal emotional support via psychological

counselling is not widely available, but can be

incorporated into routine care

Only 11% of **people with type 2 diabetes** 

receive psychological counselling as part

11%

of their treatment.

High

"I receive the

emotional support

I need"

treatments and how those

part of this dialogue. Thus

articulate themselves and

enabling individuals to

guides the HCP on what

may change in the future as

Just over half of all people with type 2

diabetes surveyed rated the emotional

support they received from their medical

team as sufficient, despite the majority not

receiving formal psychological counselling.

40%

30%

20%

10%

0%

Low

"I do <u>not</u> receive the

emotional support

I need"

nurses to provide emotional

support (especially in primary

and leveraging family, friends

and peer support.

care) through brief interventions

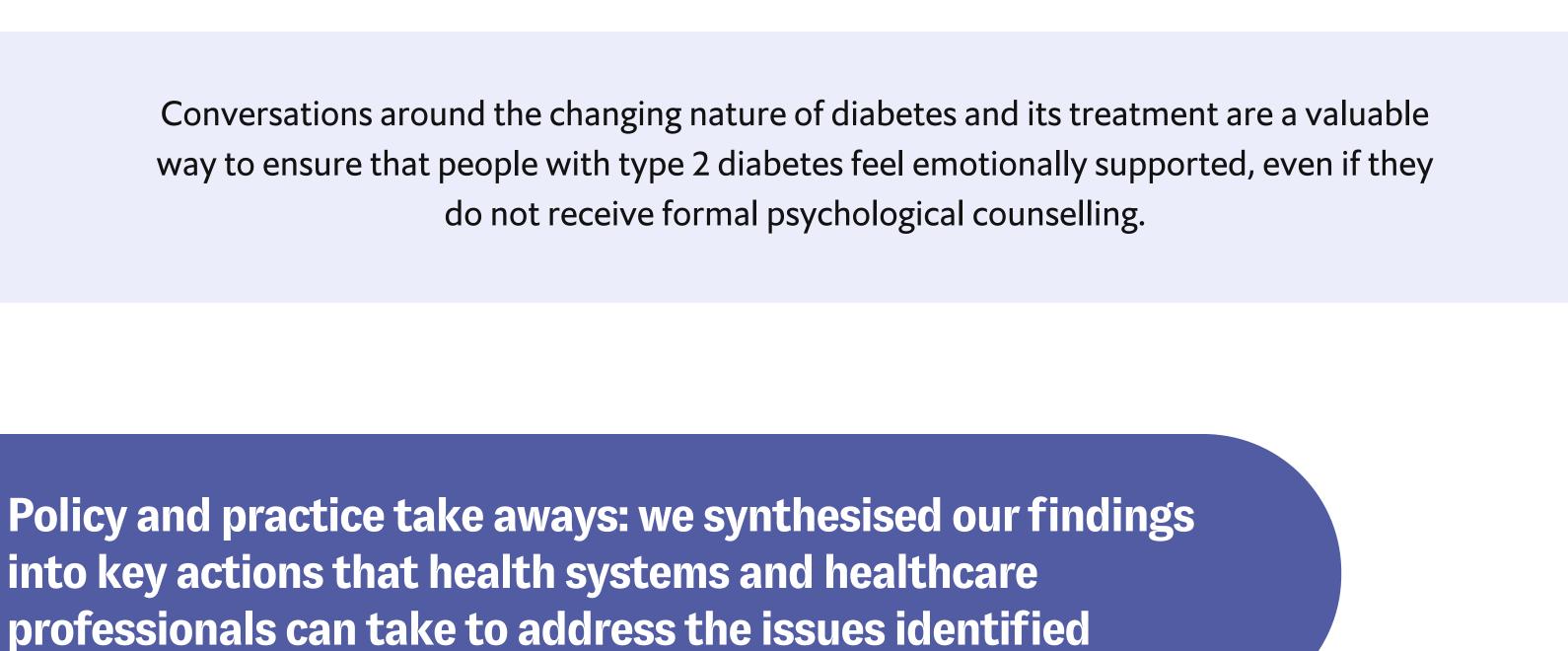
to start these new treatments.

(% of respondents) No conversation **Conversation** "We have not discussed that "We have discussed how my treatment might change diabetes is progressive" over time"

Those who had discussed the changing nature of their diabetes and its treatment were

How would you rate the emotional support given to you by your healthcare team?

more likely to rate their emotional support as sufficient than those who had not.



Health systems can provide

communication and techniques

like motivational interviewing as

to improve the emotional and

practical support delivered to

part of initial and on-going training,

people with type 2 diabetes within

HCPs with **training in** 

routine appointments.

**HCP & System** 

HCPs can directly ask people with type 2 diabetes how Individual HCPs and health they feel about their current systems can enhance the role of

Actions information and support to provide. Individual HCPs, health systems and HCPs can help people with type patient associations can leverage 2 diabetes to **understand how** family, friends and peer support to their diabetes and treatments provide information, motivation, will change over time through practical and emotional support for on-going, empowering and people with type 2 diabetes. encouraging dialogue that reduces stigma.

To find out more, read the full report at:

https://impact.economist.com/perspectives/healthcare/perceptions-changing-nature-diabetes

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