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The PANORAMA pan-European survey: glycaemic control and treatment patterns in patients with type 2 diabetes

**Author Block: P. de Pablos-Velasco**<sup>1</sup>, C. Bradley<sup>2</sup>, E. Eschwège<sup>3</sup>, L. Gönder-Frederick<sup>4</sup>, K. Parhofer<sup>5</sup>, H. Vandenberghe<sup>6</sup>, D. Simon<sup>7</sup>;

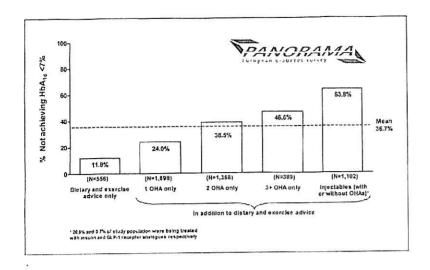
<sup>1</sup>Dr Negrin Hospital, Las Palmas University, Spain, <sup>2</sup>Royal Holloway, University of London, United Kingdom, <sup>3</sup>INSERM U-1018, Paris, France, <sup>4</sup>University of Virginia, Health System, VA, United States, <sup>5</sup>Klinikum der Universität, München, Germany, <sup>6</sup>AstraZeneca, Zaventem, Belgium, <sup>7</sup>Hôpital de la Pitié / INSERM U-1018, Paris, France.

## Abstract:

**Background and aims:** The prevalence of type 2 diabetes (T2D) continues to rise across Europe. Despite effective treatments initiated after diet/lifestyle modifications, many patients still do not achieve an  $HbA_{1c}$  target of <7%. PANORAMA is a large pan-European cross-sectional survey (NCT00916513) of patients with T2D treated with glucose-lowering therapies, aimed at assessing treatment satisfaction, quality of life and the proportion of patients achieving an  $HbA_{1c}$  <7%. This abstract reports recent data from 8 countries on glycaemic control in patients with T2D in relation to treatment patterns.

Materials and methods: Patients with T2D were randomly or consecutively selected from physician practices (mainly in primary care) in 8 countries (Belgium, Germany, Greece, Italy, Netherlands, Spain, Turkey and UK). Eligible patients: aged ≥40 y, with a diagnosis of T2D for >1 y prior to study entry and an available medical record at the clinic of >1 y. All patients received dietary and exercise advice. Most patients were also being treated with either oral hypoglycaemic agents (OHAs) or injectables (insulin and GLP-1 receptor analogues) with or without OHAs. Treatment type was unchanged in the previous 3 months. HbA<sub>1c</sub> levels were measured using an identical portable diabetes monitoring system (Bayer's A1Cnow<sup>®</sup>) in each centre. Results: 5,156 patients were included in the study from June to November 2009: 47.8% women; mean age 65.9 y (SD 10.3). Mean time since diagnosis: 9.0 y (SD 7.4). Patients were treated with advice only (10.9%), advice plus either 1 OHA only (33.3%), 2 OHAs only (26.6%), ≥3 OHAs only (7.6%), or injectables with or without OHAs (21.6%). Treatment patterns varied considerably between countries. Mean HbA<sub>1c</sub> of the entire group was 6.9% (SD 1.1). However, 36.7% of patients did not achieve an HbA<sub>1c</sub> <7%. The figure shows the percentage of patients in each treatment category who did not achieve the target HbA<sub>1c</sub> <7%.

Conclusion: When comparing the PANORAMA survey results with previous data, it appears that the level of glycaemic control in Europe may be improving. However, there is still a gap between current management and optimal treatment of patients with T2D. Furthermore, the percentage of patients not achieving target HbA<sub>1c</sub> increased as treatment was intensified. Possible explanations are that concern over hypoglycaemia may have delayed treatment intensification, reduced treatment adherence or patients on more intensive treatment may have had more difficult to control T2D perhaps due to a longer duration of T2D. These results suggest that earlier and/or more effective intensification of treatment may be needed to enable patients to achieve target HbA<sub>1c</sub> as the disorder progresses.



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European Association for the Study of Diabetes (EASD)

Rheindorfer Weg 3

D-40591 Düsseldorf - Germany

Tel: +49-211-758 469 0 - Fax: +49-211-758 469 29

Web: http://www.easd.org E-mail: abstracts@easd.org

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