

Telehealth during COVID-19 may lead to better outcomes for diabetes patients

May 11 2020



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A new study has shown that for some patients with type 1 diabetes the close monitoring of their condition using telehealth protocols combined with appropriate technology may lead to better care during the COVID-19 pandemic, when patients are avoiding in-person visits. The study, which found that telehealth monitoring could help avoid admissions for diabetic ketoacidosis, is published in *Diabetes Technology & Therapeutics*.

Entitled "The Silver Lining to COVID-19: Avoiding Diabetic Ketoacidosis Admissions with Telehealth," the article is coauthored by Anne Peters, MD, Keck School of Medicine of the University of Southern California (Los Angeles) and Satish Garg, MD, DTT Editor-in-Chief, University of Colorado Denver (Aurora).

The authors present two case studies of patients with type 1 diabetes who were treated from home using telehealth. The first was a 21-year-old male who had symptoms of COVID-19, was self-quarantining, and had rising [blood glucose levels](#) and strongly positive urinary ketones. Shared glucose data through a continuous glucose monitor (CGM) made it possible to make frequent insulin dose adjustments. He was able to recover without the need for physical interaction with the healthcare system.

The second case involved a 26-year-old woman with new-onset type 1 diabetes who was seen on day 1 briefly in the clinic for diabetes education and to obtain the necessary technology. She had very high glucose levels with ketosis. Ongoing management was via telehealth, and her glucose values improved significantly by day 6. She, too, avoided admission for hyperglycemia associated with diabetic ketosis.

"The COVID-19 pandemic has forced dramatic changes in the delivery of healthcare even in acute situations like [diabetic ketoacidosis](#) via [telehealth](#)," says DTT Editor-in-Chief Satish Garg, MD, Professor of

Medicine and Pediatrics at the University of Colorado Denver (Aurora). "The clinical outcomes are similar without any hospital admissions, thus saving significant cost. This was made possible in part by the availability of CGM data through Clarity or the Share feature of the Dexcom G6."

More information: Anne L. Peters et al, The Silver Lining to COVID-19: Avoiding Diabetic Ketoacidosis Admissions with Telehealth, *Diabetes Technology & Therapeutics* (2020). [DOI: 10.1089/dia.2020.0187](https://doi.org/10.1089/dia.2020.0187)

Provided by Mary Ann Liebert, Inc

Citation: Telehealth during COVID-19 may lead to better outcomes for diabetes patients (2020, May 11) retrieved 26 April 2024 from <https://medicalxpress.com/news/2020-05-telehealth-covid-outcomes-diabetes-patients.html>

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