

Gap in diabetes technology use among Black and white Medicare beneficiaries is worsening

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The gap in the use of insulin pumps and continuous glucose monitors (CGMs) among Black and white Medicare beneficiaries widened from 2017-2019, according to new research published in the Endocrine Society's *Journal of Clinical Endocrinology & Metabolism*.

Reducing health disparities is a major public health goal in the United States, and these disparities include the use of diabetes technology. All Medicare beneficiaries with type 1 diabetes should have <u>equal access</u> to diabetes therapy, but research shows there are inequities associated with race and ethnicity.

"This study highlights the complexity of the causes of <u>health disparities</u> in diabetes. Previous studies in non-Medicare beneficiaries point to socio-<u>economic status</u> as the key driver of unequal adoption of diabetes technology, but our study shows many other contributing factors," said Robert Vigersky, M.D., Chief Medical Officer of medical device manufacturer Medtronic Diabetes in Northridge, Calif. "Other factors include unconscious bias among <u>healthcare providers</u> who may feel that people of color may not be able to use these technologies. In addition, there are cultural barriers, low health literacy and limited access to healthcare, particularly to endocrinologists."

The researchers determined the prevalence of diabetes technology use by race and ethnicity using data from the Medicare fee-for-service database between 2017-2019. They found CGM and insulin pump use grew among all groups between 2017-2019, but the increase was greatest for white patients.

The prevalence of insulin pump use was low for Black beneficiaries in 2017 and slightly increased from 2017 to 2019 (from 3.9% to 4.6%). It was higher in 2017 for white beneficiaries and increased substantially from 2017 to 2019 (from 14.0% to 18.2%). About 25% of white beneficiaries were using CGMs in 2019, compared to 12% of Black



beneficiaries—a gap that has widened since 2017.

"We need to address the social determinants of health, including race and ethnicity, before all aspects of diabetes care become more equitable," said Vigersky, who is Past President of the Endocrine Society.

More information: Kael Wherry et al, Inequity in Adoption of Advanced Diabetes Technologies Among Medicare Fee-for-Service Beneficiaries, *The Journal of Clinical Endocrinology & Metabolism* (2021). <u>DOI: 10.1210/clinem/dgab869</u>

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