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A National Physician Survey of Deintensifying Diabetes Medications for Older Adults With Type 2 Diabetes

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Connected Content

A commentary has been published: Diabetes Medication Changes in Older Adults With Type 2 Diabetes: Insights Into Physician Factors and Questions Ahead

OBJECTIVE

To determine physicians' approach to deintensifying (reducing/stopping) or switching hypoglycemia-causing medications for older adults with type 2 diabetes.

RESEARCH DESIGN AND METHODS

In this national survey, U.S. physicians in general medicine, geriatrics, or endocrinology reported changes they would make to hypoglycemia-causing medications for older adults in three scenarios: good health, HbA_{1c} of 6.3%; complex health, HbA_{1c} of 7.3%; and poor health, HbA_{1c} of 7.7%.

RESULTS

There were 445 eligible respondents (response rate 37.5%). In patient scenarios, 48%, 4%, and 20% of physicians deintensified hypoglycemia-causing medications for patients with good, complex, and poor health, respectively. Overall, 17% of physicians switched medications without significant differences by patient health. One-half of physicians selected HbA_{1c} targets below guideline recommendations for older adults with complex or poor health.

CONCLUSIONS

Most U.S. physicians would not deintensify or switch hypoglycemia-causing medications within guideline-recommended HbA_{1c} targets. Physician preference for lower HbA_{1c} targets than guidelines needs to be addressed to optimize deintensification decisions.

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Graphical Abstract

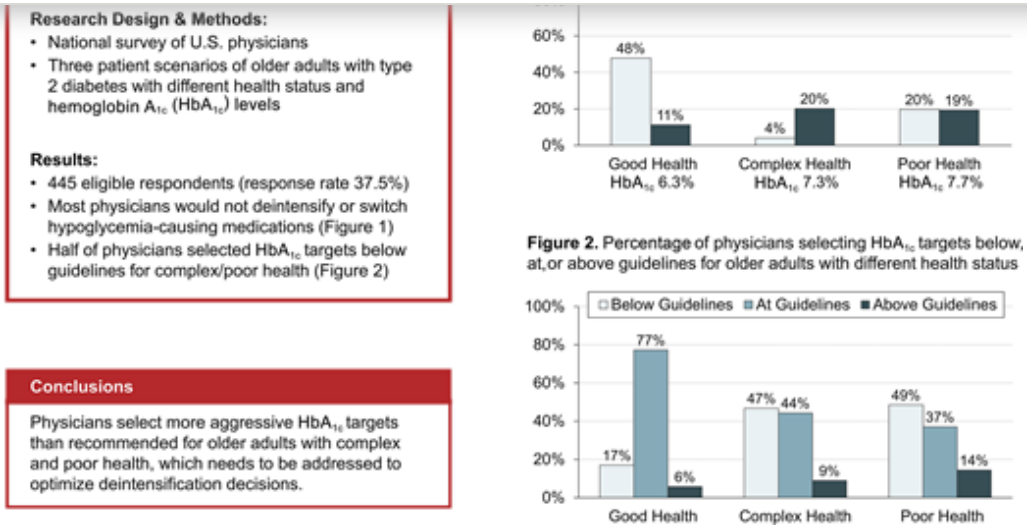

Figure 2. Percentage of physicians selecting HbA_{1c} targets below, at, or above guidelines for older adults with different health status

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See accompanying article, p. 1137.

This article contains supplementary material online at https://doi.org/10.2337/figshare.21965912.

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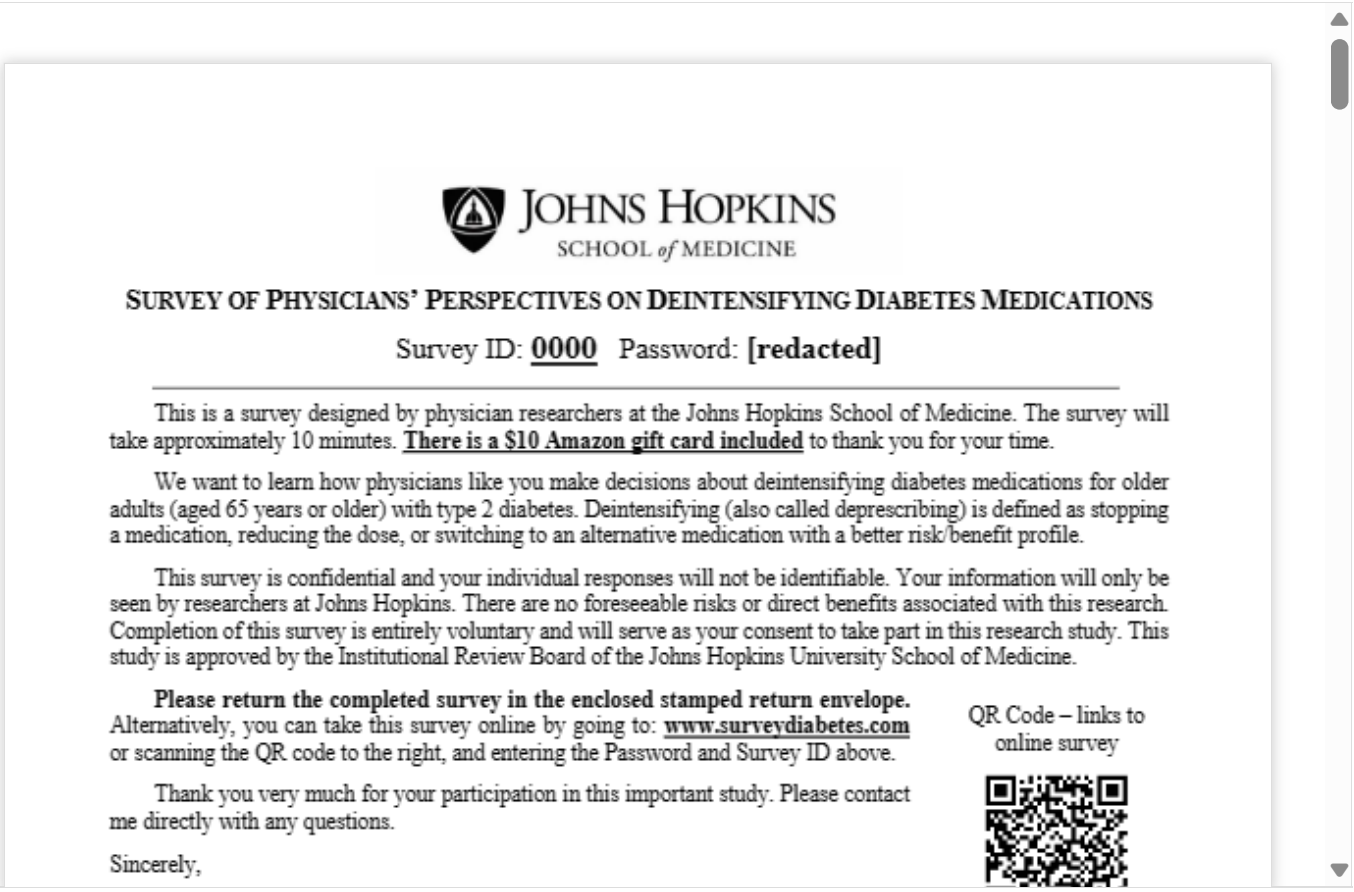

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SURVEY OF PHYSICIANS' PERSPECTIVES ON DEINTENSIFYING DIABETES MEDICATIONS

Survey ID: **0000** Password: **[redacted]**

This is a survey designed by physician researchers at the Johns Hopkins School of Medicine. The survey will take approximately 10 minutes. **There is a $10 Amazon gift card included** to thank you for your time.

We want to learn how physicians like you make decisions about deintensifying diabetes medications for older adults (aged 65 years or older) with type 2 diabetes. Deintensifying (also called deprescribing) is defined as stopping a medication, reducing the dose, or switching to an alternative medication with a better risk/benefit profile.

This survey is confidential and your individual responses will not be identifiable. Your information will only be seen by researchers at Johns Hopkins. There are no foreseeable risks or direct benefits associated with this research. Completion of this survey is entirely voluntary and will serve as your consent to take part in this research study. This study is approved by the Institutional Review Board of the Johns Hopkins University School of Medicine.

Please return the completed survey in the enclosed stamped return envelope. Alternatively, you can take this survey online by going to: **www.surveydiabetes.com** or scanning the QR code to the right, and entering the Password and Survey ID above.

QR Code – links to online survey

Thank you very much for your participation in this important study. Please contact me directly with any questions.

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