

Reduction of Hypoglycemia Across 180 U.S. Hospitals Using eGlycemic Management System® for IV Insulin Therapy with ICU and non-ICU Patients

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OBJECTIVE

Evaluate the broad-scale impact of eGlycemic Management System® (eGMS®)* on incidence of hypoglycemia among ICU and non-ICU patients receiving intravenous (IV) insulin therapy during hospitalization.

METHOD

Wake Forest School of Medicine (Winston-Salem, NC) conducted a retrospective analysis of 116,917 patients who received IV insulin therapy guided by eGMS® during a hospital admission between 12/10/17 and 12/10/19. Data was coalesced from 180 sites, 590 units, more than 20 specialties and seven primary areas of care, including emergency department, floor (sans obstetrics), intensive care unit, obstetrics, perioperative, procedural and step-down.

Primary endpoints were percentages of blood glucose measurements (BGs) <40 mg/dL and <70 mg/dL. A secondary endpoint was percentage of BGs >250 mg/dL.

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| AREA OF CARE | #BGs Total | Avg BG | #BGs <40 mg/dL | %BGs <40 mg/dL | #BGs <70 mg/dL | %BGs <70 mg/dL |
|-----------------|------------|-----------|----------------|----------------|----------------|----------------|
| ED | 192,345 | 328 mg/dL | 45 | 0.0234% | 497 | 0.2584% |
| FLOOR (sans OB) | 433,879 | 184 mg/dL | 135 | 0.0311% | 3,857 | 0.8890% |
| ICU | 4,103,254 | 152 mg/dL | 590 | 0.0144% | 20,502 | 0.4997% |
| OB | 5,008 | 146 mg/dL | 1 | 0.0200% | 90 | 1.7971% |
| PERIOP | 52,493 | 156 mg/dL | 0 | 0.0000% | 156 | 0.2972% |
| PROCEDURAL | 11,654 | 159 mg/dL | 0 | 0.0000% | 165 | 1.4158% |
| STEP-DOWN | 589,765 | 161 mg/dL | 92 | 0.0156% | 3,264 | 0.5534% |
| ALL (TOTAL) | 5,388,398 | 177 mg/dL | 863 | 0.0160% | 28,531 | 0.5295% |

RESULT

Utilization of eGMS® to guide IV insulin therapy during hospitalization was observed to result in low incidence of hypoglycemia across 180 sites, 590 units, more than 20 specialties, seven primary areas of care, 116,917 patients and 5,388,398 BG measurements. As primary endpoints, the overall mean average percentage of BGs <40 mg/dL was 0.0160% and <70 mg/dL was 0.5295%. As a secondary endpoint, the overall mean average percentage of BGs >250 mg/dL (severe hyperglycemia) was 9.5%.

CONCLUSION

Data suggests that acute care facilities of all types, sizes and geographic locales can rely on eGMS® to safely and effectively achieve low incidence of hypoglycemia among ICU and non-ICU patients requiring IV insulin therapy during hospitalization, across virtually any area of care and any specialty.

| PATIENT CHARACTERISTICS | | | |
|------------------------------|-----------|---|-------|
| Total #Patients | 116,917 | Average Admission Creatinine (mg/dL) | 1.63 |
| Total #BG Measurements | 5,388,398 | Average Admission Potassium (mmol/L) | 4.47 |
| Average Age (Yrs) | 57 | Average Admission Anion Gap (mmol/L) | 17.63 |
| Average Height (cm) | 170 | Median Time Admission-to-eGMS® Initiation (hrs) | 8 |
| Average Weight (kg) | 87 | Median Time on eGMS® (hrs) | 25 |
| Average BMI | 30 | Median Time to Target BG Range (hrs) | 5 |
| Average A1C (%) | 9.1 | Median Hospital Length of Stay (days) | 6.1 |
| Average Admission BG (mg/dL) | 352.05 | Average BG After Reaching Target (mg/dL) | 142 |
| Average Initial BG (mg/dL) | 314 | Average all BG Measurements (mg/dL) | 177 |

