

Diabetes Remission Service

A RMH Endocrinology Telehealth Rapid Access Clinical Service (Endo-TRACS)



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‘Endo-TRACS is a virtual gateway to rapid specialist multi-disciplinary Endocrinology Care’



Primary Care
chronic overload

Chronic progressive disease

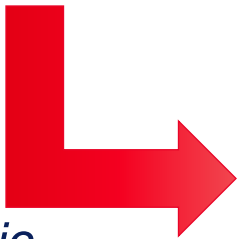
Diabetes

Bone Mineral disorders

*Rapid stabilisation
of chronic condition*



*Acute
on chronic
decompensation*



Endo-TRACS
**A virtual specialist
‘subacute care’ gateway**

*Gradual stabilisation of
chronic condition*



Chronic disease specialist clinics
chronic overload



Endo-TRACS Team – an expanding large team

Endocrinologists/Medical

Diabetes Rapid: Mervyn Kyi, Rahul Barmanray, Michelle So, Barb Paldus IDS Registrar

Diabetes Remission: Spiros Furlanos, John Wentworth

Bone-Mineral Rapid: Chris Yates, Paul Wraight, Angeline Shen, IES Registrar

Thyroid Rapid: Simon Forehan

Diabetes Education/Nursing

Diabetes Rapid: Lois Rowan

Diabetes Nurse Prac Kidney Transplant: Lois Rowan

Diabetes Remission: Diana Pammit-Mellors, Ashvin Nursing

Diabetes Nurse Tech: Katie Marley & Diabetes Education Team

Diabetes Nurse Insulin Stabilisation: Katie Marley & Diabetes Education Team

Diabetes Nurse Rapid: Katie Marley & Diabetes Education Team

Dietitians

Diabetes Rapid: Steve Flint

Diabetes Remission: Samantha Stuk, Steve Flint, Emma Armstrong

Administration

Admin: Connie Tsironis, Tanya Ivanov, Alanah Delany, Pauline Decelis

Project officer: Rong Shen

Aim of Endocrinologist-led three consult model:

- Improve rapid access to specialist multi-disciplinary care including rural and regional patients
- Support primary health care to manage patients in the community
- Reduce avoidable hospital presentations and readmissions

Diabetes Remission – a new Endo-TRACS model-of-care

Why:

- Shift thinking of Diabetes as an inevitable chronic progressive medical condition
- Early intervention has potential to prevent downstream impact on individuals and the health system from both Diabetes and its associated chronic diseases, such as heart and kidney disease
- Potential to significantly reduce the mortality and morbidity burden
- Recent advances in weight loss pharmacotherapies and strategies makes this possible

Aim: Prevent long-term diabetes through recovering pancreatic beta-cell function

Start date: Sept 2023, Wednesday AM Clinic (Clinician 1 Furlanos, Clinician 2 Wentworth)

Patient cohort:

Eligibility criteria:

1. Adult-onset diabetes diagnosed within the previous 24 months (age 18–75 years)
2. Abdominal obesity (waist > 80 cm in women, >94 cm in men or BMI >25 kg/m²)
3. Commitment to executing dietary and physical activity interventions
4. Absence of untreated active axis 1 mental health disorders



Diabetes Remission Endo-TRACS

Clinical services delivered:

Bundle of treatments to promote weight loss and lower blood glucose:

- Endocrinologist telehealth consultations (maximum of three) to devise a diabetes in remission management plan
- Diabetes nurse liaison to encourage patient follow up in primary care and the community to execute the diabetes in remission management plan, including recommendations for diabetes medication to promote weight loss, dietitian and exercise physiologist follow up.
- Team: Spiros Furlanos & Diana Pammit-Mellors, John Wentworth & Ashvin Nursing, Dietitians Samantha Stuk, Steve Flint, Emma Armstrong

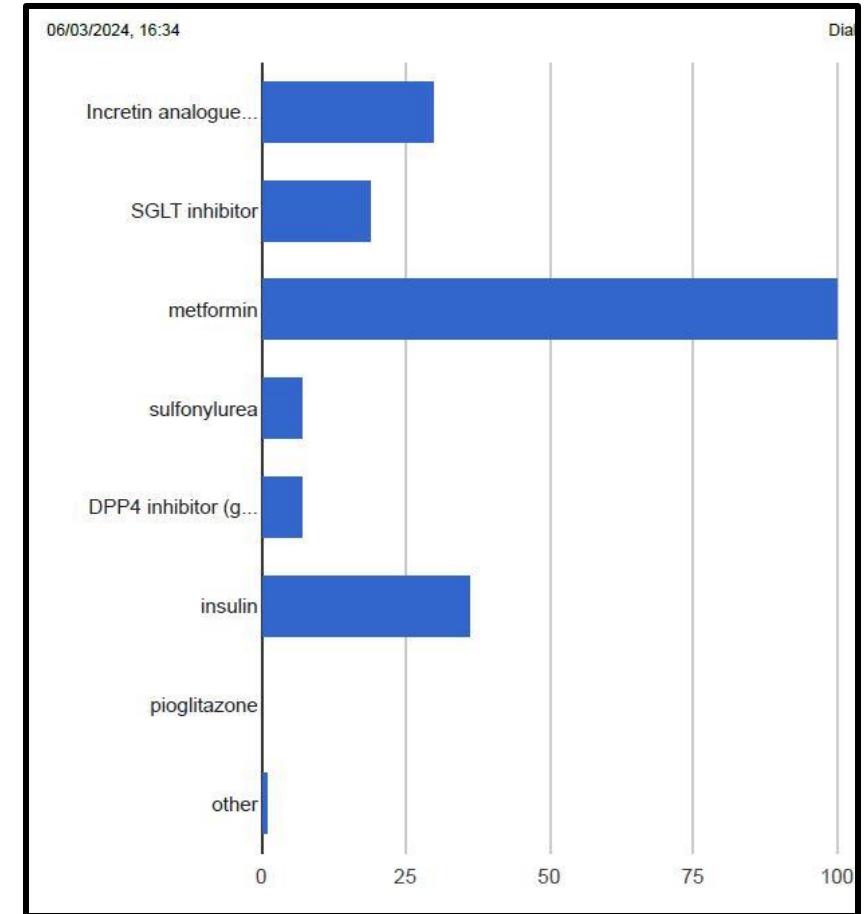
Targets:

- Aiming for 4 new patients per week
- To date over 70 new patients referred, >300 consultations performed



Diabetes Remission Endo-TRACS: Model-of-care

- Telehealth convenience
- Specialist co-consultation (medical + nursing ± dietitian)
- Detailed assessment and documentation of Mx plans
- Explicit aims
 1. 10-15% weight loss
 2. HbA1c <5.7%
- Pharmacotherapy + lifestyle intervention combination
- Execution in community with primary care

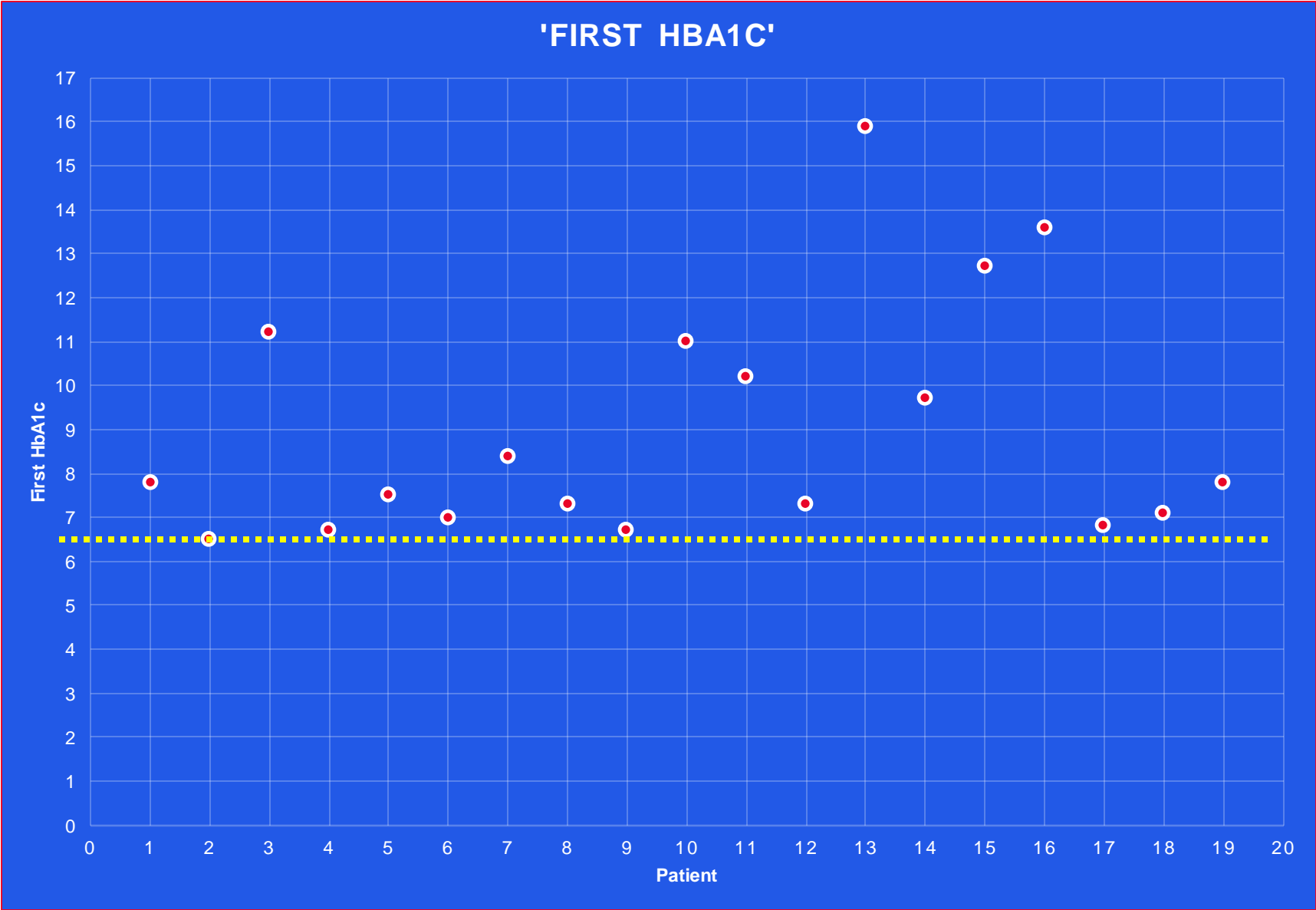


DR Endo-TRACS

Pilot trial - baseline

Mean baseline
HbA1c 9% = 12 mmol/L

Weight 99kg



DR Endo-TRACS

Pilot trial - outcomes

Mean follow up 4 months

Mean HbA1c 6.2% (eAG 7.2 mmol/L)

Δ HbA1c 2.8%

Δ Weight 5kg

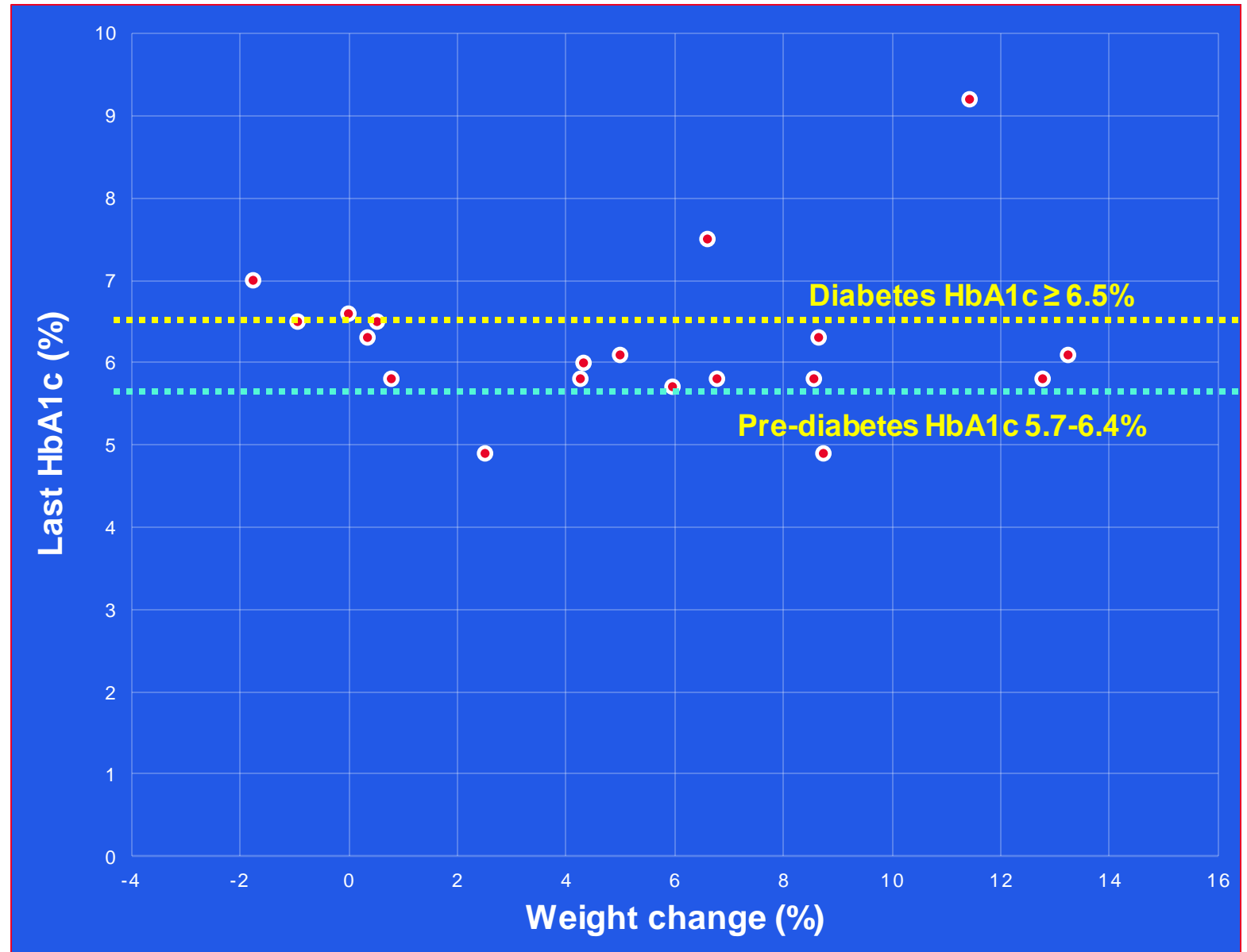
A majority of patients now in Diabetes Remission Territory

58% in pre-diabetes range

10% in normoglycaemia range

Caveat:

- on diabetes medication
- mean follow up 4 months



Positive lessons so far.....

- **Rapid change in metabolic outcomes is achievable in early stage type 2 diabetes**
- **The value of specialist health professional co-consultation (Endo, Diabetes educator, Dietitian)
Handover, video co-consultation, consistency messaging and goals, intensive follow-up etc**
- **The value of time spent with the person in the initial phases of diabetes to devise a detailed plan**
- **Patient desire and appreciation of the convenience of the DR Endo-TRACS telehealth service
Truly a patient-centred service**

Intensive Lifestyle Intervention for Remission of Early Type 2 Diabetes in Primary Care in Australia: DiRECT-Aus

Diabetes Care 2024;47:66–70 | <https://doi.org/10.2337/dc23-0781>

Samantha L. Hocking,^{1–3}
Tania P. Markovic,^{1–3} Crystal M.Y. Lee,⁴
Tegan J. Picone,^{1,2} Kate E. Gudorf,⁵ and
Stephen Colagiuri^{1,2}

UK DIRECT study (Diabetes Remission Clinical Trial), where 36% of participants (eligible up to 6-years after diagnosis) achieved remission of their type-2 diabetes two years after a diet-based, weight management programme.

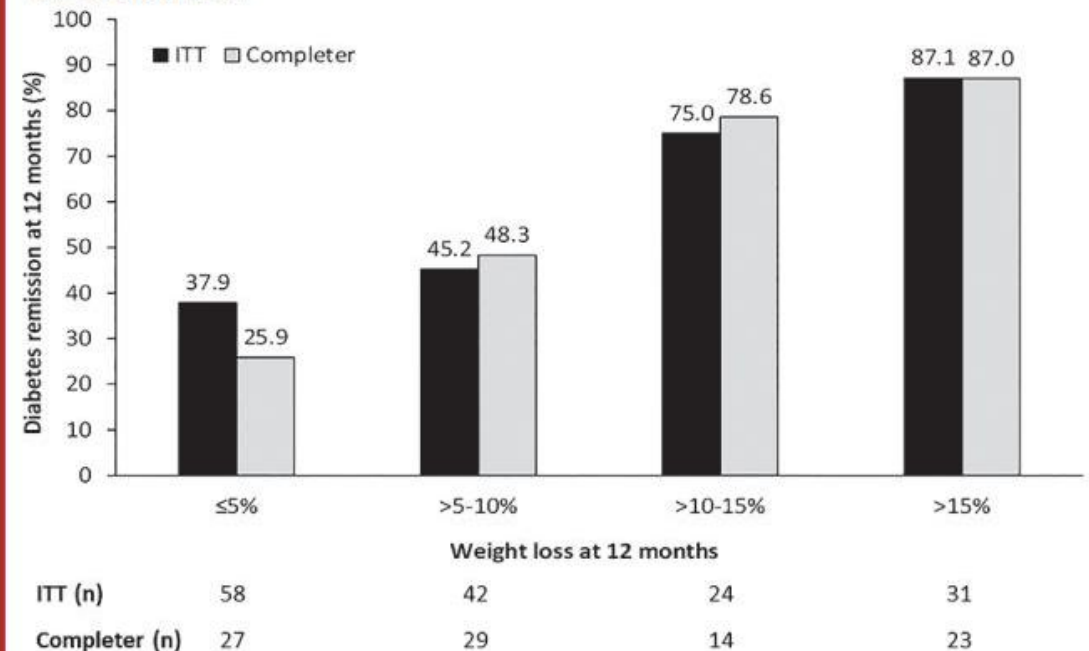
Intervention

- Participants with recently diagnosed type 2 diabetes and BMI >27 kg/m² recruited from 25 primary care practices across New South Wales.
- 13-week low-energy total diet replacement (Optifast; Nestlé Health Science), 8-week structured food reintroduction, and 31-week supported weight maintenance.
- Glucose-lowering medication was withdrawn.

Results

- Diabetes remission occurred in 86 (56%) participants with mean adjusted weight loss of 8.1% at 12 months.
- Likelihood of diabetes remission was proportional to weight loss.

Diabetes remission by percent weight loss achieved at 12 months*



*ITT (intention-to-treat) population (n=155) commenced total diet replacement. Completer (n=93) population completed total diet replacement and attended >50% of remaining study visits.

New referrals for Diabetes Remission – within 2 years DM diagnosis

- We are keen for your feedback

We would be grateful if you could complete primary care survey

- Send referrals to RMH

outpatientreferrals@mh.org.au OR **diabetesendo@mh.org.au**