

Press Release

Type 2 diabetes: Patients reporting better quality of communication by their physician show improved self-care

- *‘Encouraging’ and ‘collaborative’ physician communication is linked to better patient outcomes*
- *New IntroDia™ Survey patient data are presented at American Diabetes Association’s® (ADA) 75th Scientific Sessions*
- *IntroDia™ is an initiative of Boehringer Ingelheim and Lilly in partnership with the International Diabetes Federation*

Ingelheim, Germany and Indianapolis, US, 08 June, 2015, 09:00 CEST – New research shows that the quality of patient-physician communication, at the moment when additional oral type 2 diabetes (T2D) medication is prescribed (‘add-on’), is linked to future patient self-care and well-being.¹ Data from the IntroDia™ Survey have quantitatively demonstrated this link in the largest international survey of its kind, using responses from 4,235 people with T2D across 26 countries.*¹

The perceived quality of the ‘add-on’ conversation by patients was linked to all self-management outcomes surveyed.¹ Patients who recalled better quality of communication when interacting with their physicians reported improved self-care and emotional well-being, including improved diabetes-related emotional distress, frequency of exercise and diet, as well as better medication adherence.¹

Dr Matthew Capehorn, UK, GP and member of the IntroDia™ Advisory Panel commented, “If not framed properly, the introduction of additional oral medication for type 2 diabetes management can be a challenging moment for patients. An encouraging conversation with a physician can make a real difference to subsequent self-management. We now have data that confirm how important the quality of communication is during this ‘add-on’ conversation.”

Analysis of the conversations indicated patients distinguish three types of physician statements that contribute to communication quality: ‘encouraging’, ‘collaborative’ and ‘discouraging’.¹ When physicians used ‘encouraging’ and ‘collaborative’ statements, patients’ perception of the communication quality significantly improved.¹ Using ‘discouraging’ statements had the opposite effect.¹

‘Encouraging’ communication included statements such as:

- “My doctor explained that the new medication would help to control my diabetes.”
- “My doctor told me that the new medication would improve my quality of life.”

‘Collaborative’ communication examples were:

- “My doctor invited me to ask questions about my new medication.”
- “My doctor helped to adjust my treatment plan so I could do it in my daily life.”

‘Discouraging’ communication included statements like:

- “My doctor told me that my diabetes is out of control.”
- “My doctor told me that I needed more medication because I had failed to take good enough care of myself.”

The analysis also looked into which statements were most frequently recalled by patients from their ‘add-on’ conversations. ‘Encouraging’ statements were recalled by up to 85 percent of patients. ‘Discouraging’ statements were recalled by up to 53 percent of patients.¹

“The patient data demonstrate that physicians are already doing a good job, by most often using ‘encouraging’ and ‘collaborative’ statements and using ‘discouraging’ statements less frequently. However, ‘add-on’ conversations can still be further improved to help patients make the positive behavioural changes required to manage type 2 diabetes,” concluded Dr Capehorn.

*4,235 people with T2D, out of the total 10,319 included in the IntroDia™ Survey, met the necessary criteria to be asked about ‘add-on’ moment conversations. All 10,319 survey participants were asked about their early ‘diagnosis’ conversations.

About IntroDia™

IntroDia™ is the largest multi-national survey to date investigating early conversations between physicians and people with T2D. It includes insights from 6,753 physicians and 10,139 people with T2D from 26 countries. The survey focuses on two potentially pivotal time points in T2D management: diagnosis and the 'add-on' moment, when additional oral medication is introduced. Data evaluation is ongoing and further insights will be announced throughout 2015 and 2016. The IntroDia™ Survey's physician insights, coupled with upcoming patient findings, will be used to develop solutions that help shape the early T2D conversations and ultimately improve quality of care.

IntroDia™ is an initiative of Boehringer Ingelheim and Eli Lilly and Company in partnership with the International Diabetes Federation. It has been developed in collaboration with an international, multidisciplinary Advisory Board of T2D experts from the field of primary care, endocrinology, behavioural psychology, nursing and diabetes education including: Ms. Anne Belton, Canada; Dr. William Polonsky, USA; Dr. Steven Edelman, USA; Dr. Matthew S Capehorn, UK and Ms. Susan Down, UK, Professor Aus Al Zaid, Saudi Arabia.

Survey Design

The IntroDia™ Survey used a combination of validated assessment tools and new research approaches to assess quality of care and identify key elements of physician-patient communication. It was conducted by online questionnaire and with telephone and personal interviews if required.

The data in this release are from the responses of 4,235 people with T2D from 26 countries who were asked about their experiences during 'add-on' conversations, including what their physician said or did. Patients' perception of the quality of physician communication was assessed through a series of questions including: "Did the doctor explain things in a way you could understand?" and "Did the doctor show respect for what you had to say?"

Intended audiences

This press release is issued from Boehringer Ingelheim Corporate Headquarters in Ingelheim, Germany and is intended to provide information about our global business. Please be aware that information relating to the approval status and labels of approved products may vary from country to country, and a country-specific press release on this topic may have been issued in the countries where Boehringer Ingelheim and Eli Lilly and Company do business.

Boehringer Ingelheim and Eli Lilly and Company

In January 2011, Boehringer Ingelheim and Eli Lilly and Company announced an alliance in diabetes that centres on compounds representing several of the largest diabetes treatment classes. The alliance leverages the strengths of two of the world's leading pharmaceutical companies. By joining forces, the companies demonstrate commitment in the care of patients with diabetes and stand together to focus on patient needs. Depending on geographies, the companies either co-promote or separately promote the respective molecules each contributed to the alliance.

Boehringer Ingelheim

The Boehringer Ingelheim group is one of the world's 20 leading pharmaceutical companies. Headquartered in Ingelheim, Germany, Boehringer Ingelheim operates globally with 146 affiliates and a total of more than 47,700 employees. The focus of the family-owned company, founded in 1885, is researching, developing, manufacturing and marketing new medications of high therapeutic value for human and veterinary medicine.

Social responsibility is an important element of the corporate culture at Boehringer Ingelheim. This includes worldwide involvement in social projects, such as the initiative "Making more Health" and caring for the employees. Respect, equal opportunities and reconciling career and family form the foundation of the mutual cooperation. In everything it does, the company focuses on environmental protection and sustainability.

In 2014, Boehringer Ingelheim achieved net sales of about 13.3 billion euros. R&D expenditure corresponds to 19.9 per cent of its net sales.

For more information please visit www.boehringer-ingelheim.com

About Lilly Diabetes

Lilly has been a global leader in diabetes care since 1923, when we introduced the world's first commercial insulin. Today we are building upon this heritage by working to meet the diverse needs of people with diabetes and those who care for them. Through research and collaboration, a broad and growing product portfolio and a continued determination to provide real solutions—from medicines to support programs and more—we strive to make life better for all those affected by diabetes around the world. For more information, visit www.lillydiabetes.com.

About Eli Lilly and Company

Lilly is a global healthcare leader that unites caring with discovery to make life better for people around the world. We were founded more than a century ago by a man committed to creating high-quality medicines that meet real needs, and today we remain true to that mission in all our work. Across the globe, Lilly employees work to discover and bring life-changing medicines to those who need them, improve the understanding and management of disease, and give back to communities through philanthropy and volunteerism. To learn more about Lilly, please visit us at www.lilly.com and newsroom.lilly.com/social-channels.

###

CONTACT:**Dr Petra Kienle**

Product Communication Manager
Boehringer Ingelheim GmbH
Email: petra.kienle@boehringer-ingelheim.com
Phone: +49 6132 77 143877

Molly McCully

Communications Manager
Lilly Diabetes
Email: mccully_molly@lilly.com
Phone: +1 (317) 478 5423

Reference

1. Capehorn M, *et al.* Physician-patient Communication at Prescription of an Additional Oral Agent for Type 2 Diabetes (T2D): Link Between Key Conversation Elements, Physician Empathy and Patient Outcomes – Insights From the Global IntroDia™ Study. Poster 63-LB at the 75th Scientific Sessions of the American Diabetes Association® (ADA) 2015, Boston, USA.