WEBVTT

NOTE duration:"00:04:40" NOTE recognizability:0.804

NOTE language:en-us

NOTE Confidence: 0.743409108571429

00:00:00.000 --> 00:00:03.976 Hi everyone, my name is Maria Dalzell.

NOTE Confidence: 0.743409108571429

 $00:00:03.980 \longrightarrow 00:00:05.702$ I'm excited to share with you my

NOTE Confidence: 0.743409108571429

 $00:00:05.702 \longrightarrow 00:00:07.313$ project cost of treatment conversations

NOTE Confidence: 0.743409108571429

 $00:00:07.313 \longrightarrow 00:00:08.953$ between primary care clinicians

NOTE Confidence: 0.743409108571429

 $00:00:08.953 \longrightarrow 00:00:11.110$ and patients living with diabetes.

NOTE Confidence: 0.743409108571429

00:00:11.110 --> 00:00:13.025 My advisors and coauthors were

NOTE Confidence: 0.743409108571429

 $00{:}00{:}13.025 \dashrightarrow 00{:}00{:}14.691$ Doctor Bradley Richardson, Dr.

NOTE Confidence: 0.743409108571429

00:00:14.691 --> 00:00:16.224 Rossana Gonzalez, colosso.

NOTE Confidence: 0.743409108571429

 $00:00:16.224 \longrightarrow 00:00:18.268$ So some background treatment.

NOTE Confidence: 0.743409108571429

 $00{:}00{:}18.270 \dashrightarrow 00{:}00{:}20.805$ Affor dability has both financial and

NOTE Confidence: 0.743409108571429

 $00{:}00{:}20.805 \dashrightarrow 00{:}00{:}22.833$ medical implications for patients

NOTE Confidence: 0.743409108571429

 $00{:}00{:}22.833 \dashrightarrow 00{:}00{:}25.539$ increasing out of pocket expenses are

NOTE Confidence: 0.743409108571429

 $00:00:25.539 \longrightarrow 00:00:27.243$ associated with inadequate medication

 $00:00:27.243 \longrightarrow 00:00:29.295$ use and among all chronic diseases

NOTE Confidence: 0.743409108571429

 $00{:}00{:}29.295 \dashrightarrow 00{:}00{:}30.920$ contributing to these high costs.

NOTE Confidence: 0.743409108571429

 $00:00:30.920 \longrightarrow 00:00:33.308$ Diabetes is one of the nation's

NOTE Confidence: 0.743409108571429

 $00:00:33.308 \longrightarrow 00:00:34.104$ most expensive.

NOTE Confidence: 0.743409108571429

 $00:00:34.110 \longrightarrow 00:00:36.156$ Yet little is known about the

NOTE Confidence: 0.743409108571429

00:00:36.156 --> 00:00:38.280 frequency of cost of treatment,

NOTE Confidence: 0.743409108571429

 $00:00:38.280 \longrightarrow 00:00:40.060$ conversations between patients and their

NOTE Confidence: 0.743409108571429

 $00:00:40.060 \longrightarrow 00:00:42.290$ clinicians in the diabetes care setting,

NOTE Confidence: 0.743409108571429

00:00:42.290 --> 00:00:43.510 specially in outpatient care,

NOTE Confidence: 0.743409108571429

 $00:00:43.510 \longrightarrow 00:00:45.916$ we set out to describe the prevalence

NOTE Confidence: 0.743409108571429

 $00{:}00{:}45.916 \dashrightarrow 00{:}00{:}47.968$ of positive treatment conversations.

NOTE Confidence: 0.743409108571429

00:00:47.970 --> 00:00:49.450 Between patients living with

NOTE Confidence: 0.743409108571429

 $00:00:49.450 \longrightarrow 00:00:50.930$ diabetes and primary care,

NOTE Confidence: 0.743409108571429

 $00:00:50.930 \longrightarrow 00:00:52.985$ clinicians given the impact that

NOTE Confidence: 0.743409108571429

 $00:00:52.985 \longrightarrow 00:00:55.040$ treatment affordability may have on

NOTE Confidence: 0.743409108571429

 $00:00:55.102 \longrightarrow 00:00:57.397$ effective and safe disease management,

 $00:00:57.400 \longrightarrow 00:00:59.275$ we also explored the attitudes

NOTE Confidence: 0.743409108571429

 $00:00:59.275 \longrightarrow 00:01:01.150$ of patients and their clinicians

NOTE Confidence: 0.743409108571429

 $00:01:01.216 \longrightarrow 00:01:03.091$ towards addressing cost of diabetes

NOTE Confidence: 0.743409108571429

 $00:01:03.091 \longrightarrow 00:01:05.510$ treatment in a primary care setting.

NOTE Confidence: 0.743409108571429

 $00:01:05.510 \longrightarrow 00:01:07.540$ This was a cross sectional study which

NOTE Confidence: 0.743409108571429

 $00:01:07.540 \longrightarrow 00:01:09.549$ was conducted at one outpatient federally

NOTE Confidence: 0.743409108571429

 $00:01:09.549 \longrightarrow 00:01:11.344$ qualified health care clinic within

NOTE Confidence: 0.743409108571429

 $00{:}01{:}11.344 \dashrightarrow 00{:}01{:}13.756$ a major New England health care system.

NOTE Confidence: 0.743409108571429

 $00{:}01{:}13.760 \dashrightarrow 00{:}01{:}16.050$ The study was granted Institutional

NOTE Confidence: 0.743409108571429

 $00:01:16.050 \longrightarrow 00:01:17.424$ Review Board exemption.

NOTE Confidence: 0.743409108571429

00:01:17.430 --> 00:01:19.210 We retrospectively identified potential

NOTE Confidence: 0.743409108571429

 $00:01:19.210 \longrightarrow 00:01:21.435$ patients living with diabetes who

NOTE Confidence: 0.743409108571429

00:01:21.435 --> 00:01:23.950 had been seen in this clinic between

NOTE Confidence: 0.743409108571429

 $00:01:23.950 \longrightarrow 00:01:25.640$ September and December of 2020.

NOTE Confidence: 0.743409108571429

 $00:01:25.640 \longrightarrow 00:01:27.656$ And those who were identified through

 $00:01:27.656 \longrightarrow 00:01:29.788$ the search were then randomized to

NOTE Confidence: 0.743409108571429

 $00:01:29.788 \longrightarrow 00:01:32.343$ occult order and a telephone survey was

NOTE Confidence: 0.743409108571429

00:01:32.343 --> 00:01:34.536 delivered both in English and in Spanish

NOTE Confidence: 0.743409108571429

 $00:01:34.536 \longrightarrow 00:01:36.980$ to be inclusive with Hispanic patients.

NOTE Confidence: 0.743409108571429

 $00:01:36.980 \longrightarrow 00:01:40.760$ Clinicians who had seen patients between

NOTE Confidence: 0.743409108571429

 $00:01:40.760 \longrightarrow 00:01:44.286$ September and December 2020 were all

NOTE Confidence: 0.743409108571429

 $00:01:44.286 \longrightarrow 00:01:47.550$ invited to participate via email survey.

NOTE Confidence: 0.743409108571429

00:01:47.550 --> 00:01:50.090 Response to questions or dichotomous,

NOTE Confidence: 0.743409108571429

 $00:01:50.090 \longrightarrow 00:01:51.788$ continuous and categorical

NOTE Confidence: 0.743409108571429

00:01:51.788 --> 00:01:53.486 means standard deviation,

NOTE Confidence: 0.743409108571429

00:01:53.490 --> 00:01:54.428 relative frequencies,

NOTE Confidence: 0.743409108571429

 $00:01:54.428 \longrightarrow 00:01:57.242$ and proportions were used to discuss

NOTE Confidence: 0.743409108571429

 $00:01:57.242 \longrightarrow 00:01:58.966$ descriptive statistics to analyze

NOTE Confidence: 0.743409108571429

00:01:58.966 --> 00:02:00.776 the clinician and patient groups

NOTE Confidence: 0.743409108571429

 $00{:}02{:}00.776 \longrightarrow 00{:}02{:}02.652$ sample so some of the results are

NOTE Confidence: 0.743409108571429

 $00:02:02.652 \longrightarrow 00:02:05.390$ shown by the figures on the right.

 $00:02:05.390 \longrightarrow 00:02:06.434$ As you can see,

NOTE Confidence: 0.743409108571429

 $00:02:06.434 \longrightarrow 00:02:08.000$ figure one shows the proportion of

NOTE Confidence: 0.743409108571429

00:02:08.059 --> 00:02:09.784 patients who endorsed concerns regarding

NOTE Confidence: 0.743409108571429

 $00:02:09.784 \longrightarrow 00:02:11.889$ the cost of dirt diabetes treatment

NOTE Confidence: 0.743409108571429

 $00:02:11.889 \longrightarrow 00:02:13.509$ along with the patient reported

NOTE Confidence: 0.743409108571429

 $00:02:13.509 \longrightarrow 00:02:15.652$ frequency of cost of human conversations.

NOTE Confidence: 0.743409108571429

 $00:02:15.652 \longrightarrow 00:02:18.178$ So about 1/3 of patients reported

NOTE Confidence: 0.743409108571429

 $00{:}02{:}18.178 \dashrightarrow 00{:}02{:}20.522$ some kind of concern over

NOTE Confidence: 0.743409108571429

00:02:20.522 --> 00:02:22.438 affording their diabetes treatment,

NOTE Confidence: 0.743409108571429

 $00:02:22.440 \dashrightarrow 00:02:24.659$ yet 13% of patients reported having had

NOTE Confidence: 0.743409108571429

 $00:02:24.659 \longrightarrow 00:02:26.651$ these costs of treatment conversations

NOTE Confidence: 0.743409108571429

 $00{:}02{:}26.651 \dashrightarrow 00{:}02{:}29.086$ with their primary care clinician.

NOTE Confidence: 0.743409108571429

 $00{:}02{:}29.090 \dashrightarrow 00{:}02{:}31.125$ Figure two shows the clinician

NOTE Confidence: 0.743409108571429

 $00{:}02{:}31.125 \dashrightarrow 00{:}02{:}33.160$ reported frequency of cost of

NOTE Confidence: 0.743409108571429

 $00:02:33.229 \longrightarrow 00:02:36.458$ treatment conversations as well as

 $00:02:36.458 \longrightarrow 00:02:39.238$ their attitudes towards how often.

NOTE Confidence: 0.743409108571429

 $00:02:39.240 \longrightarrow 00:02:42.030$ How we should discuss past training

NOTE Confidence: 0.743409108571429

 $00:02:42.030 \longrightarrow 00:02:43.890$ conversations with our patients.

NOTE Confidence: 0.743409108571429

00:02:43.890 --> 00:02:45.186 Almost every clinician agreed

NOTE Confidence: 0.743409108571429

 $00:02:45.186 \longrightarrow 00:02:47.130$ or strongly agreed that cost of

NOTE Confidence: 0.743409108571429

 $00:02:47.190 \longrightarrow 00:02:49.266$ treatment is an issue for their

NOTE Confidence: 0.743409108571429

 $00:02:49.266 \longrightarrow 00:02:50.650$ patients with diagnosed diabetes.

NOTE Confidence: 0.743409108571429

 $00:02:50.650 \longrightarrow 00:02:51.730$ When asked who

NOTE Confidence: 0.889982185

 $00{:}02{:}51.740 \dashrightarrow 00{:}02{:}54.830$ these conversations, who should be having

NOTE Confidence: 0.931105645

00:02:54.840 --> 00:02:56.960 these conversations? The majority

NOTE Confidence: 0.931105645

 $00{:}02{:}56.960 \dashrightarrow 00{:}02{:}59.232$ of patients picked their primary

NOTE Confidence: 0.931105645

 $00:02:59.232 \longrightarrow 00:03:01.470$ care clinician, whereas the

NOTE Confidence: 0.926340588

 $00{:}03{:}01.500 \dashrightarrow 00{:}03{:}03.150$ clinician responses were more mixed

NOTE Confidence: 0.926340588

 $00:03:03.150 \longrightarrow 00:03:05.264$ with their top four answers being

NOTE Confidence: 0.926340588

00:03:05.264 --> 00:03:06.900 pharmacist primary care provider,

NOTE Confidence: 0.926340588

 $00:03:06.900 \longrightarrow 00:03:09.050$ insurance company or patient educator.

 $00:03:10.100 \longrightarrow 00:03:12.108$ So this study found that cost of treatment

NOTE Confidence: 0.901614014

00:03:12.120 --> 00:03:14.140 was under discussed between primary

NOTE Confidence: 0.901614014

 $00:03:14.140 \longrightarrow 00:03:16.160$ care clinicians and their patients.

NOTE Confidence: 0.901614014

 $00:03:16.160 \longrightarrow 00:03:18.266$ This was despite the proportion of

NOTE Confidence: 0.901614014

 $00:03:18.266 \longrightarrow 00:03:20.401$ patients that expressed concern over their

NOTE Confidence: 0.901614014

 $00:03:20.401 \longrightarrow 00:03:22.061$ costs of diabetes treatment clinicians.

NOTE Confidence: 0.901614014

 $00:03:22.061 \longrightarrow 00:03:24.238$ In our study expressed high awareness that

NOTE Confidence: 0.901614014

 $00:03:24.238 \longrightarrow 00:03:26.768$ cost of medication can affect medication use.

NOTE Confidence: 0.901614014

 $00{:}03{:}26.770 \dashrightarrow 00{:}03{:}29.578$ Yet most reported only sometimes or

NOTE Confidence: 0.901614014

 $00{:}03{:}29.578 \dashrightarrow 00{:}03{:}32.520$ rarely bringing it up in practice.

NOTE Confidence: 0.901614014

00:03:32.520 --> 00:03:34.428 While patients prefer to have these

NOTE Confidence: 0.901614014

 $00:03:34.428 \longrightarrow 00:03:36.430$ discussions with their primary care provider,

NOTE Confidence: 0.901614014

 $00{:}03{:}36.430 \dashrightarrow 00{:}03{:}37.962$ who's ultimately the prescriber,

NOTE Confidence: 0.901614014

00:03:37.962 --> 00:03:39.877 other health care team members

NOTE Confidence: 0.901614014

 $00:03:39.877 \longrightarrow 00:03:41.896$ could share their responsibility as

 $00:03:41.896 \longrightarrow 00:03:43.866$ of addressing these costs through

NOTE Confidence: 0.901614014

 $00:03:43.866 \longrightarrow 00:03:45.600$ patient education and advising.

NOTE Confidence: 0.901614014

 $00{:}03{:}45.600 \dashrightarrow 00{:}03{:}47.228$ Primary care clinicians could

NOTE Confidence: 0.901614014

 $00:03:47.228 \longrightarrow 00:03:48.856$ also initiate these conversations,

NOTE Confidence: 0.901614014

 $00:03:48.860 \longrightarrow 00:03:50.670$ and subsequently they can integrate

NOTE Confidence: 0.901614014

 $00:03:50.670 \longrightarrow 00:03:52.922$ other health care workers and exploring

NOTE Confidence: 0.901614014

00:03:52.922 --> 00:03:54.817 strategies such as switching to

NOTE Confidence: 0.901614014

 $00:03:54.817 \longrightarrow 00:03:56.840$ lower costs or alternative therapy,

NOTE Confidence: 0.901614014

 $00{:}03{:}56.840 \dashrightarrow 00{:}03{:}58.644$ assisting patients in applying

NOTE Confidence: 0.901614014

 $00:03:58.644 \longrightarrow 00:04:01.350$ for insurance or charity care or

NOTE Confidence: 0.901614014

 $00:04:01.429 \longrightarrow 00:04:02.719$ facility in copay.

NOTE Confidence: 0.901614014

 $00:04:02.720 \longrightarrow 00:04:04.288$ We acknowledge several limitations.

NOTE Confidence: 0.901614014

 $00{:}04{:}04.288 \dashrightarrow 00{:}04{:}07.359$ This study has a small sample size from

NOTE Confidence: 0.901614014

 $00:04:07.359 \longrightarrow 00:04:09.764$ a single primary care clinic and patient

NOTE Confidence: 0.901614014

00:04:09.764 --> 00:04:11.674 clinician groups were not matched,

NOTE Confidence: 0.901614014

 $00:04:11.680 \longrightarrow 00:04:14.676$ thus were unable to deduce any correlations.

00:04:14.680 --> 00:04:17.305 Selection bias may have been

NOTE Confidence: 0.901614014

 $00:04:17.305 \longrightarrow 00:04:19.405$ introduced from the survey.

NOTE Confidence: 0.901614014

 $00:04:19.410 \longrightarrow 00:04:21.858$ Through the telephone or the email

NOTE Confidence: 0.901614014

 $00:04:21.858 \longrightarrow 00:04:23.650$ correspondence and our study sample

NOTE Confidence: 0.901614014

 $00{:}04{:}23.650 \dashrightarrow 00{:}04{:}25.720$ only focused on physicians and further

NOTE Confidence: 0.901614014

 $00{:}04{:}25.786 \dashrightarrow 00{:}04{:}27.856$ studies should include other types of

NOTE Confidence: 0.901614014

 $00:04:27.856 \longrightarrow 00:04:30.649$ clinicians such as PS or nurse practitioners.

NOTE Confidence: 0.901614014

 $00:04:30.650 \longrightarrow 00:04:32.498$ Thank you so much for listening.

NOTE Confidence: 0.909162425

 $00:04:33.240 \longrightarrow 00:04:34.368$ My references and acknowledgements

NOTE Confidence: 0.909162425

 $00:04:34.368 \longrightarrow 00:04:35.496$ are at the bottom.