



Does blood pressure telemonitoring increase the number of diabetic patients at goal blood pressure?

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Disclosures

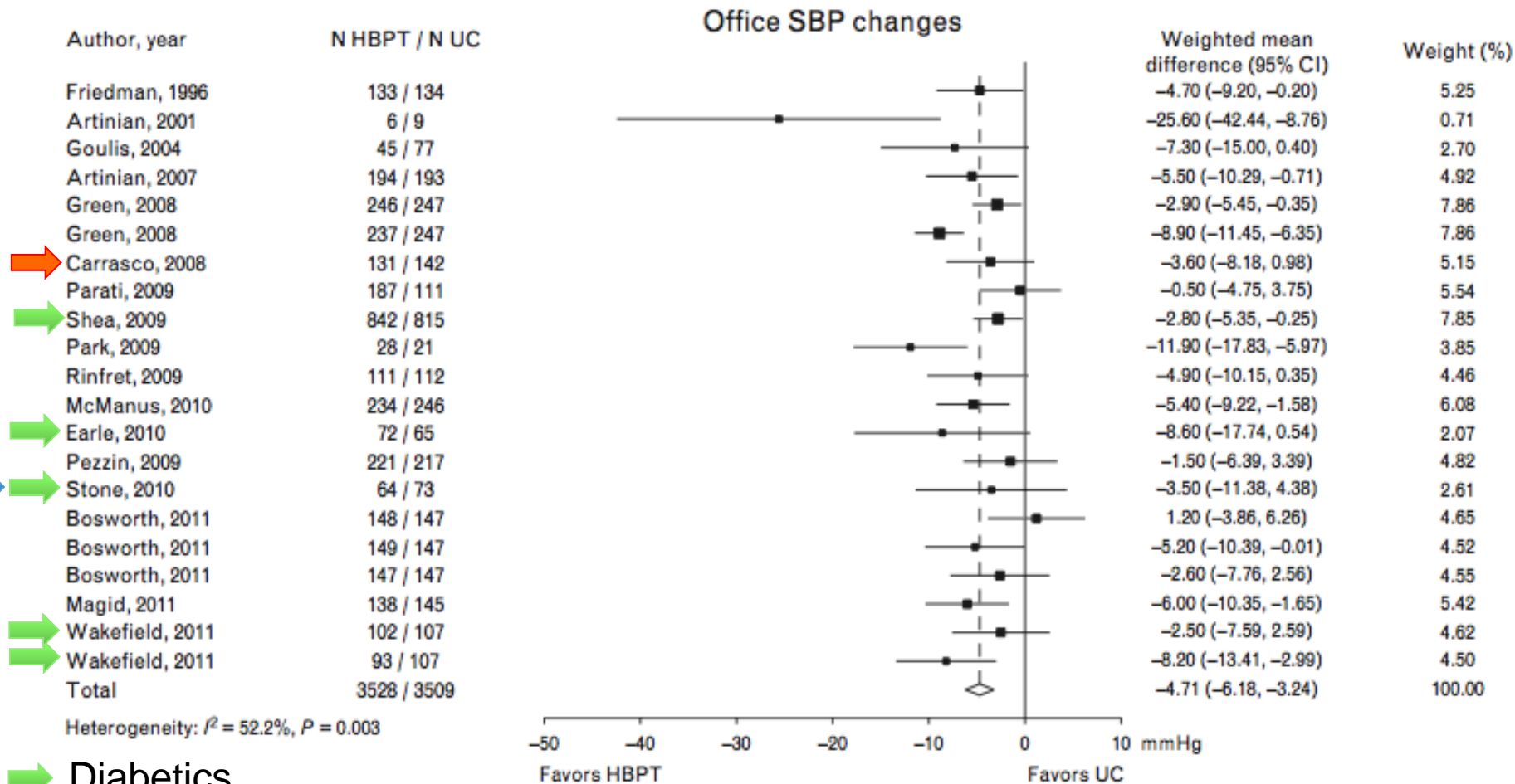
- No financial disclosures

Hypertension (HTN) Problem

- HTN treatment is inadequate for most
- HTN treatment is more successful with:
 - Team-based support (nurse or pharmacist)
 - Facilitated relay of blood pressure data
 - Patient awareness and self-management
- Home vs. office-based blood pressure (BP)

	Home	Office
Diagnostic Accuracy (sens/spec)	86%/63%	75%/75%
Outcomes Correlation (CV & all-cause mortality)	Better	Good
Office Visits	Fewer	More
Overall Costs	Lower	Higher

Telemonitoring vs. Usual Care 2013 Meta-analysis¹



→ Diabetics

→ Home BP comparison group

→ Care management

1. Omboni S. et al. Clinical usefulness and cost effectiveness of home blood pressure telemonitoring. J Hypertens. 2013.

Clinical Question

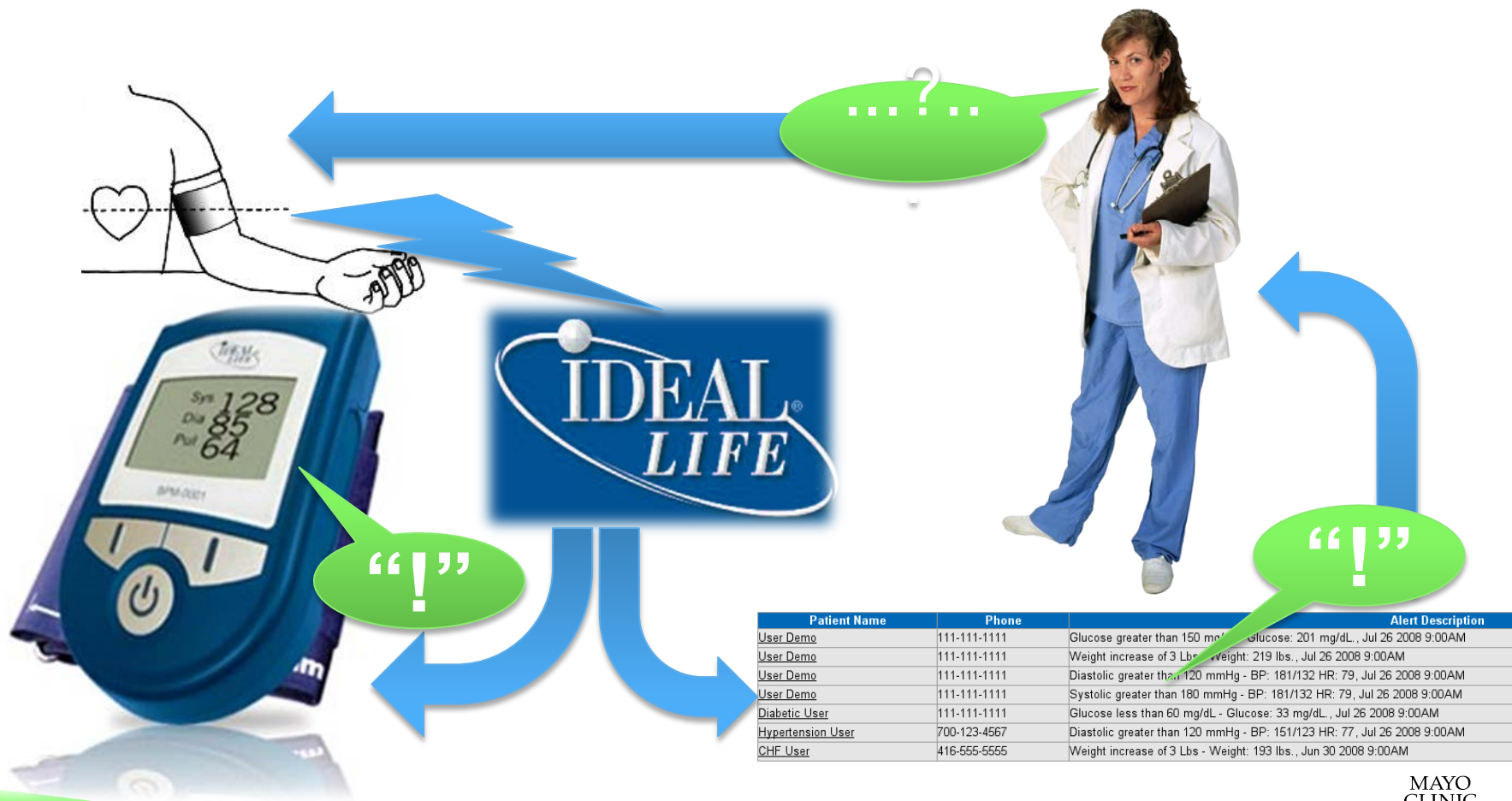
- For diabetic patients in a primary care practice with nurse care management, does home BP telemonitoring (compared to home BP testing without telemonitoring) increase the number of patients at goal blood pressure?

Study Design

- Randomized trial
 - Intervention = **IdealLife** home BP telemonitor (n=25)
 - Control = **Omron** home BP monitor (n=25)
 - All patients:
 - Nurse care manager
 - Usual care
 - Not blinded to intervention
 - Academic primary care practice, Rochester, MN, USA

Intervention

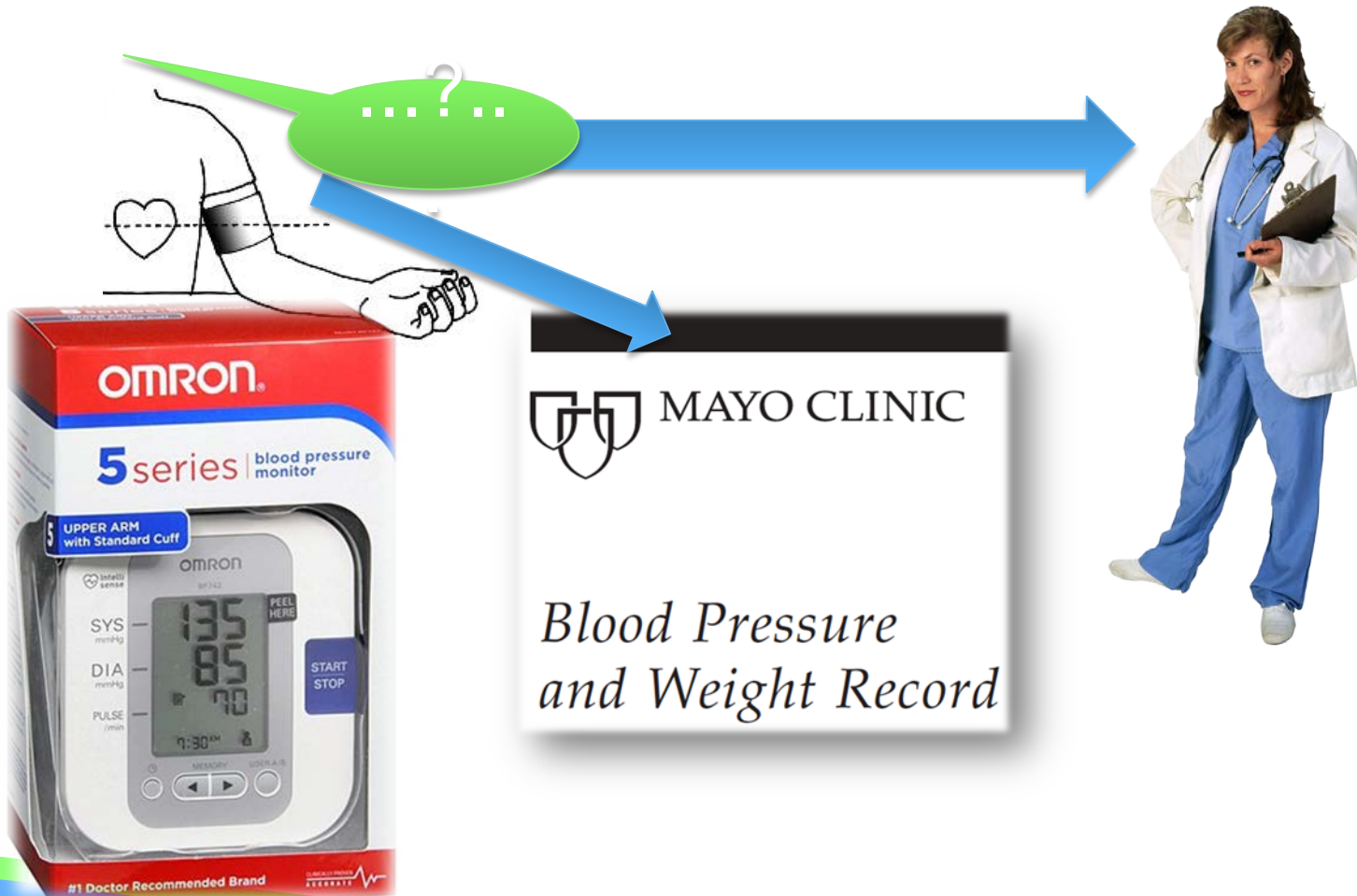
- IdealLife home BP telemonitor



Patient Name	Phone	Alert Description
User Demo	111-111-1111	Glucose greater than 150 mg/dL - Glucose: 201 mg/dL, Jul 26 2008 9:00AM
User Demo	111-111-1111	Weight increase of 3 Lbs - Weight: 219 lbs., Jul 26 2008 9:00AM
User Demo	111-111-1111	Diastolic greater than 120 mmHg - BP: 181/132 HR: 79, Jul 26 2008 9:00AM
User Demo	111-111-1111	Systolic greater than 180 mmHg - BP: 181/132 HR: 79, Jul 26 2008 9:00AM
Diabetic User	111-111-1111	Glucose less than 60 mg/dL - Glucose: 33 mg/dL, Jul 26 2008 9:00AM
Hypertension User	700-123-4567	Diastolic greater than 120 mmHg - BP: 151/123 HR: 77, Jul 26 2008 9:00AM
CHF User	416-555-5555	Weight increase of 3 Lbs - Weight: 193 lbs., Jun 30 2008 9:00AM

Control

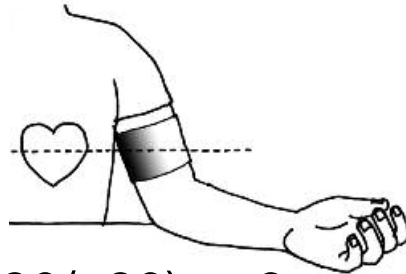
- Omron home BP monitor



Methods

- Participants

- Primary care patients with diabetes
- Uncontrolled HTN (BP >140/90)



- Outcomes

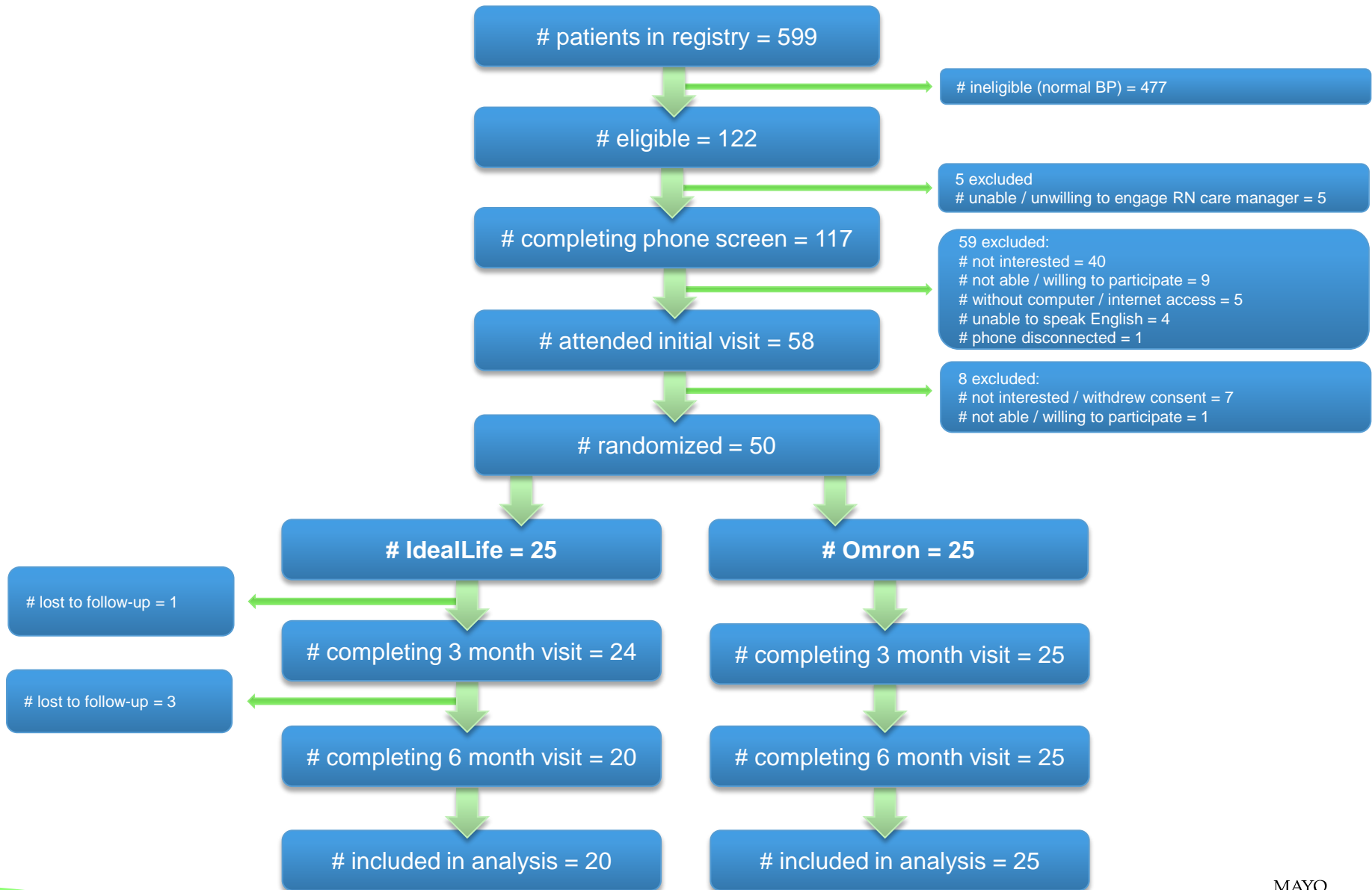
- 1^o= proportion achieving goal BP (<130/<80) at 6 months
- 2^o= change in mean BP, number of interactions
- BP assessments at baseline, 3 months, and 6 months

- Analysis

- Intention-to-treat
- Missing data = last value carried forward
- Statistics
 - two sample test for proportions (1^o outcome)
 - t-test (2^o outcome)

Demographics

	IdealLife count (percent)	Omron count (percent)	p-value
Age, mean (std dev)	63.24 (7.9)	62.36 (8.5)	0.35
Sex, male	10 (40)	12 (48)	0.57
Race, white	24 (96)	25 (100)	0.31
Number of BP meds, mean (std dev)	2 (0.91)	2.2 (1.73)	0.69
Years on BP meds, mean (std dev)	14.68 (8.45)	17.32 (12.63)	0.78
Years as diabetic, mean (std dev)	16 (12.31)	16.32 (8.67)	0.54

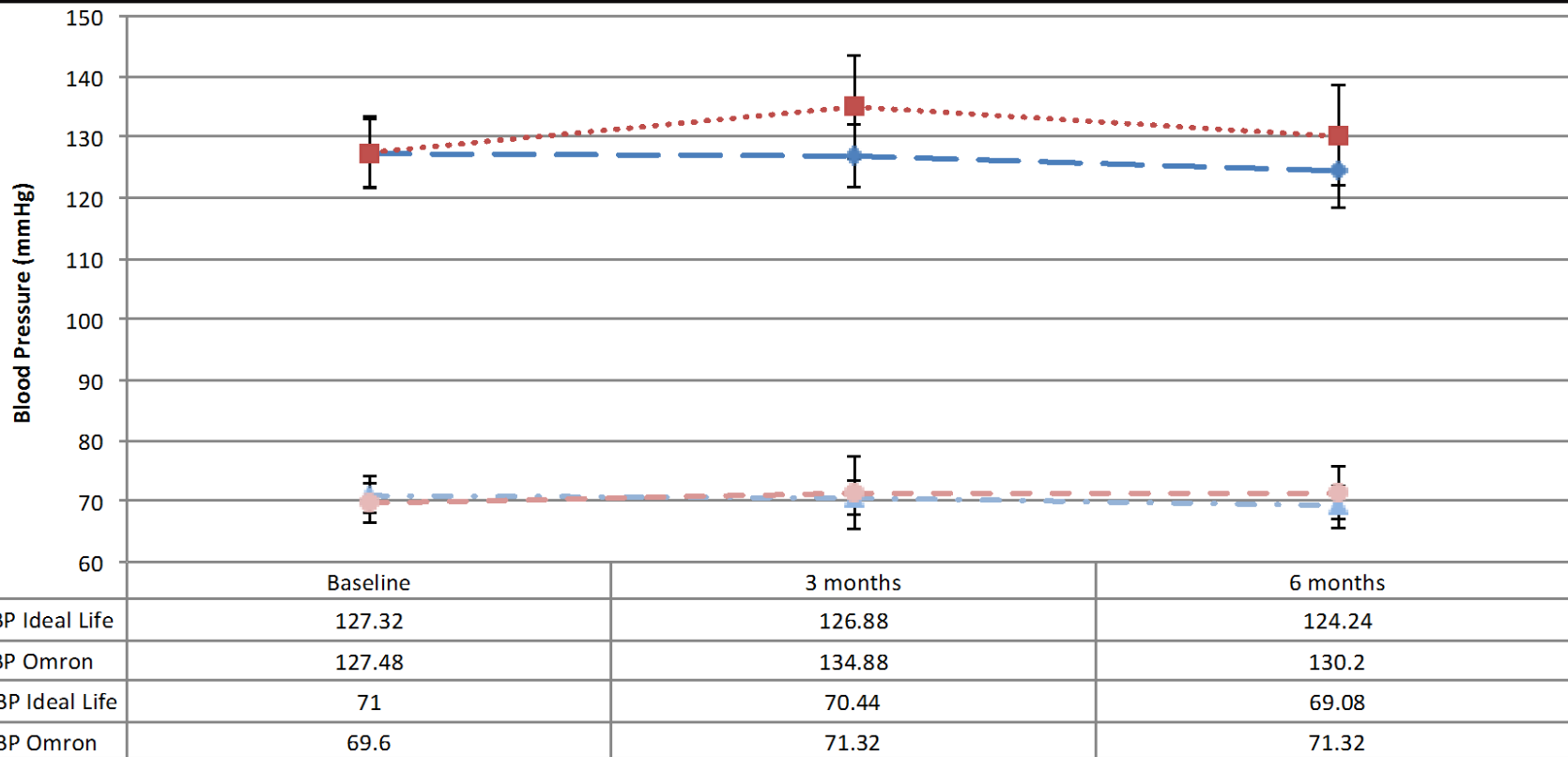


Primary Outcome: Proportion at goal BP (<130/<80)

	IdealLife	p-value	Omron	p-value
Achieving goal BP, baseline; count [%]	14 [56%]		11 [44%]	
Achieving goal BP, 6 months; count [%]	15 [60%]		16 [64%]	
Proportion at Goal BP, difference [95% CI]	0.04 [-0.2 to 0.3]	0.78	0.2 [-0.1 to 0.4]	0.16

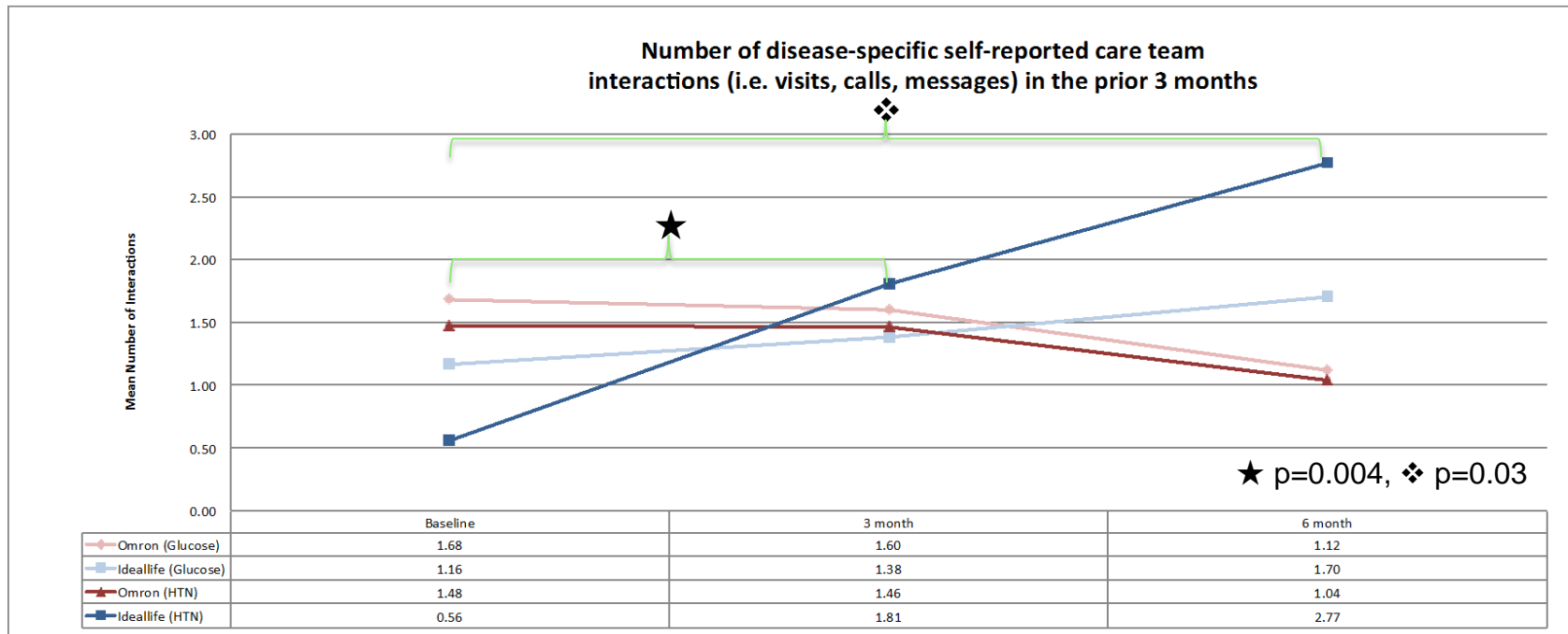
- At 6 months (vs. baseline)
 - IdealLife = 4% more at goal BP (non-significant)
 - Omron = 20% more at goal BP (non-significant)

Systolic and Diastolic BP Change (matched pairs comparison)



	IdealLife (6 mo. vs baseline)	p-value	Omron (6 mo. vs baseline)	p-value
SBP difference [mean, 95% CI]	3.1 [-2.4 to 8.6]	0.25	-2.7 [-11.1 to 5.6]	0.22
DBP difference [mean, 95% CI]	1.9 [-1.4 to 5.2]	0.24	-1.7 [-5.7 to 2.3]	0.38

Care team interactions about BP increased with telemonitoring



- At 6 month visit (vs baseline) IdealLife patients reported an average of ~2.2 more care team interactions about blood pressure in the prior 3 months
- No differences in the Omron group
- No differences in interactions about glucose (control outcome)

Study Limitations

- Limited power (due to dropouts)
 - 72% power to detect a 35% difference in proportion at goal
 - 72% power to detect a 10 mmHg difference in systolic BP
- BP control at baseline was better than predicted
- Single site academic medical center
- Race majority white
- RN care manager not universally available

Summary

- RCT comparing home BP **tele**monitoring with home BP **self**-monitoring over 6 months
- Powered to detect moderate to large differences
- Outcomes
 - No difference in proportion of patients at goal BP
 - No difference in mean BP
 - Significantly more self-reported care team interactions about blood pressure in telemonitoring group



Questions & Discussion

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