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# Strategies to Reduce Clinical Inertia in Patients with Diabetes

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Clinical inertia is a lack of timely adjustment to medication and/or lifestyle therapy when a patient's treatment goals are not met. It is a major contributing factor to hyperglycemia in patients with diabetes. Data show that early glucose management leads to a reduction in complications and improves long-term outcomes. Conversely, not reaching desired glycemic targets early on reduces a patient's chance of achieving targets further in their treatment.<sup>1</sup> Despite frequent monitoring and guideline recommendations to escalate therapy,<sup>2</sup> intensification of therapy in uncontrolled diabetes often is delayed.<sup>3-5</sup>

## Strategies to Reduce Clinical Inertia in Practice<sup>6</sup>

**Take the following actions to begin addressing clinical inertia:**

- Schedule diabetes-only visits to allow adequate time to discuss diabetes specific goals or questions patients may have about their care. Utilize other health care disciplines and Diabetes Self-Management Education and Support (DSMES) to improve touch points and diabetes education.
- Develop a personalized care plan that takes patient concerns, wishes, and needs into account. Review this care plan regularly and update it at each visit.
- Integrate screening for behavioral health and social barriers and identify support for patient.
- Make quick adjustments in therapy any time a patient's A1C targets are not at goal. This includes medication dose escalation, initiation of additional pharmacological therapy, and nutrition or lifestyle changes.<sup>5</sup>
- Schedule follow-up appointments according to how close the patient's A1C is to goal. Utilize technology, such as telehealth and electronic medical records, to create more patient touch points.

For more information, access Cardi-OH's expanded resource on **clinical inertia**.



### Schedule follow-up appointments based on patient's A1C:

- Every 4 weeks for those at 9% or higher
- Every 2 to 3 months for those between 7 and 8.9%, and
- Every 3 to 6 months for those <7% or at their personal target<sup>6,7</sup>

#### References

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