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Len Testa

PATH is software to help physicians improve outcomes in patients with type 2 diabetes.

PATH analyzes millions of potential treatment options in customized patient scenarios to find solutions most likely to succeed.

Challenges

PATH can help physicians meet current and future challenges

- 300% growth in diabetes cases since 1980 and diagnosis rates up 227%^[1]
- 46 to 72 million adults potentially affected by 2050^[2]
- Increasing shortage of clinical endocrinologists^[3]
- Complexity from new treatment options and insurance industry

Growing Case Load[4]

The number of U.S. adults with diabetes is estimated to double by 2050. Growth from:

Aging population

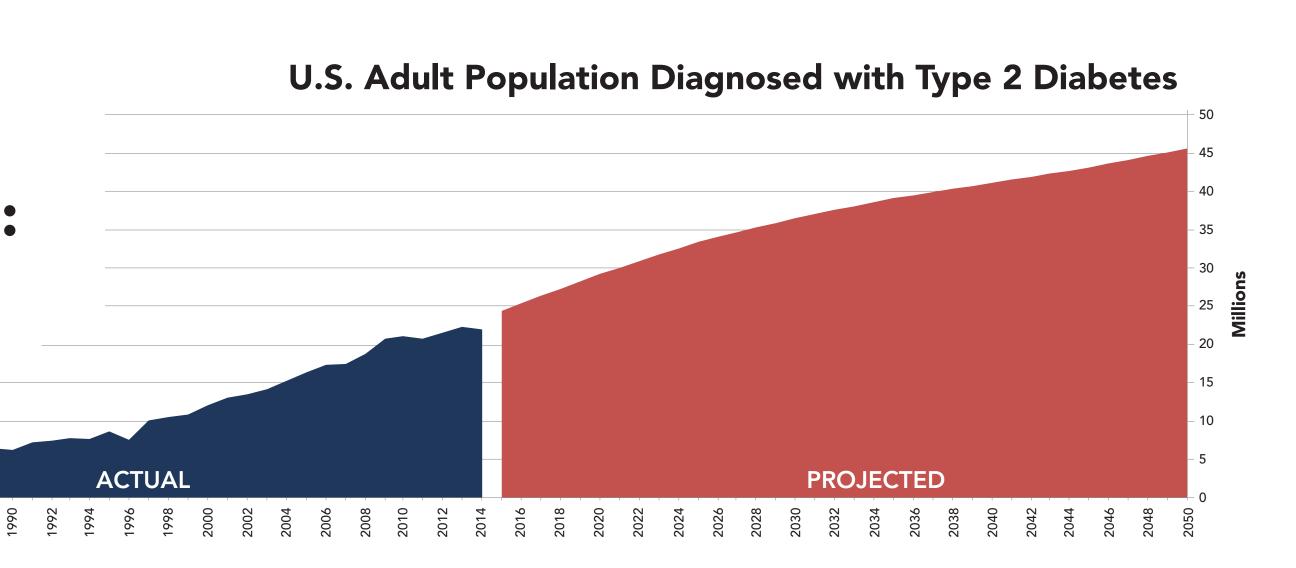
Supply and Demand

2015

2020 Michigan Charles Charles

2025 Michigan Charles Charles

- Demographic trends in high-risk groups
- Increasing life expectancy



Endocrinologist Shortage^[5]

The U.S. has half as many board-certified endocrinologists as it needs. Diabetes cases are growing faster than new M.Ds. Causes:

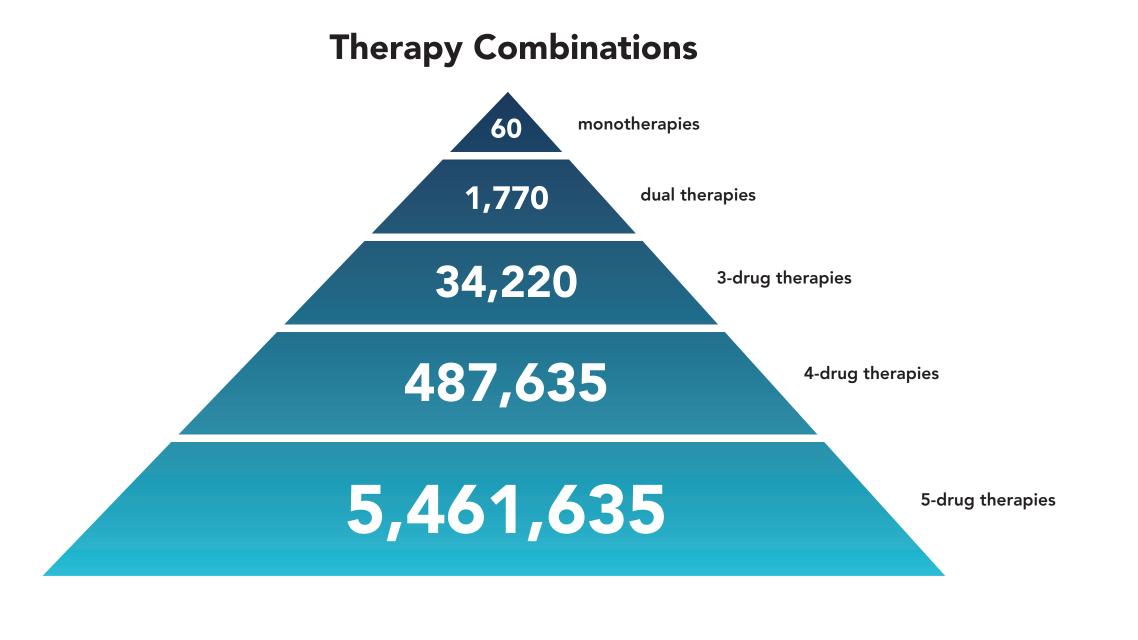
- Fewer training programs and fellowships
- Lower compensation and reimbursement rates
- Retirement and attrition

Increasing Complexity

Hard to keep up with 60+ common diabetes drugs

♣ = 100 Doctors

- Impossible to analyze 500K multi-drug options in a moderately complex patient setting
- Even clinically straightforward patient scenarios may have complex insurer pricing that affects the patient's adherence and outcome.



AACE Comprehensive T2D Algorithm

AACE algorithm prioritizes therapies by balancing a broad spectrum of risks, benefits, and impact on pathophysiology. Key principles include:

- Individualized a1c target based on factors such as age, comorbidities, allergies
- Minimize risk of hypoglycemia and weight gain
- Medication based on efficacy, MOA, administration, adherence, and more

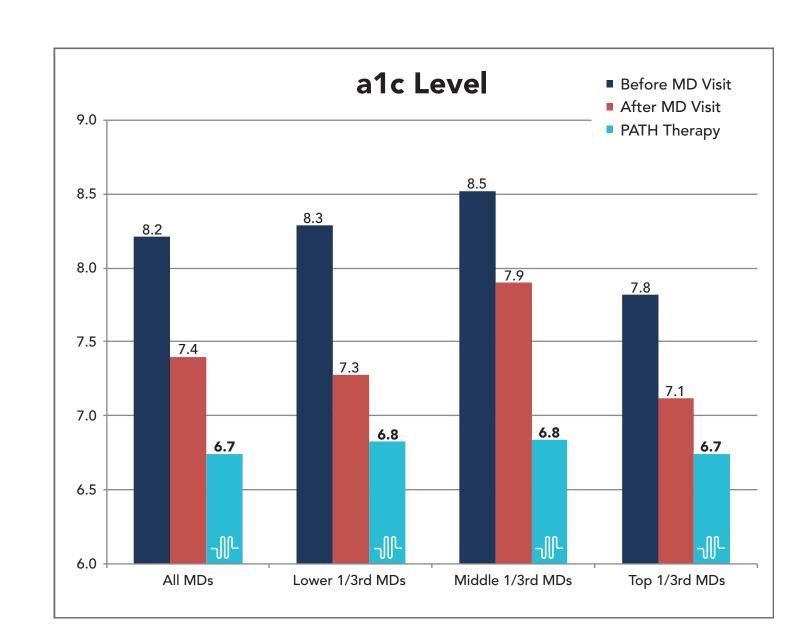
PATH is the first Type 2 Diabetes decision support tool built with the core principals of AACE integrated with core values of patient access in mind.

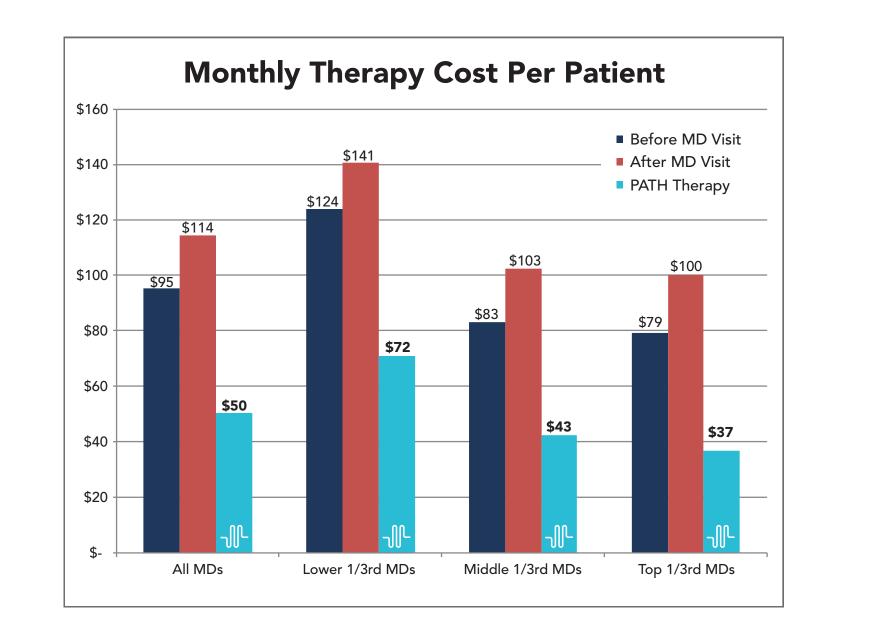
Results

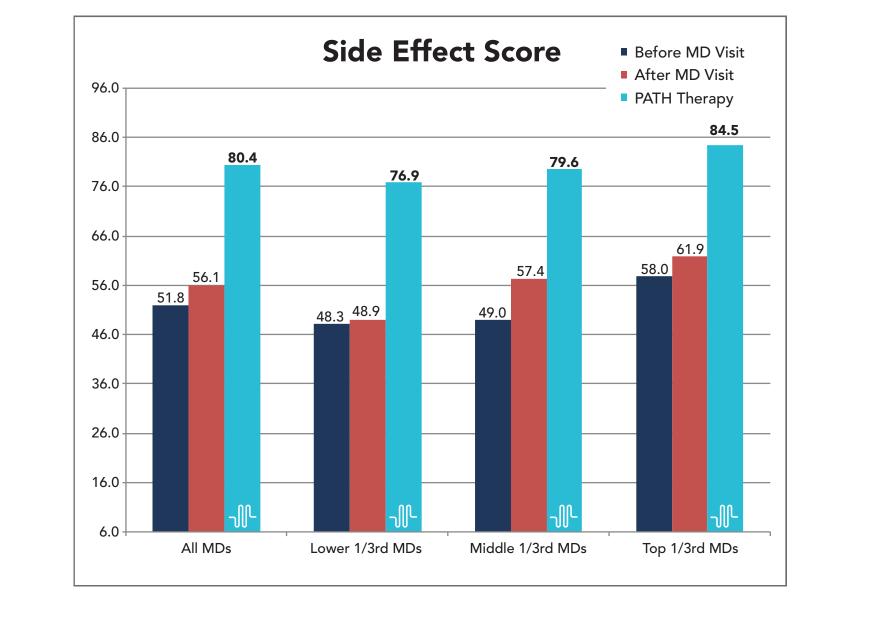
Charts of 200 patients with Type 2 DM with HgbA1c >7 were analyzed for patient characteristics and physician's decision regarding therapy. Primary care physicians were ranked into 3 groups based on the average HgbA1c in their poorly controlled patients. The PATH software was applied to the pre-intervention patient and compared to the decisions made by physicians.

Study Outcome Estimates

- Average PATH therapy saves a projected \$764/year vs most recent PCP therapy
- Projected A1c level of <u>6.7</u> vs 7.4 for most recent PCP therapy
- Composite risk benefit scoring showed 40.1% better results with PATH vs. PCP







Balanced, Efficient, Aggressive

PATH technology recognises the total disease state of DM2.

- Larger # of meds/patient
- 3.5 for PATH vs 2.2 for PCP
- Favors weight friendly medications vs. PCP
- SGLT (46.5% vs 23.5%)
- GLP1 (19.1% vs. 6.5%)
- Balances cost and physiology
- Actos (38.5% vs 5.0%)
- Side effects consider non-glucose related risks and benefits



EHR integration and dynamic formulary access are planned with a longitudinal trial within the year.

More Information

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PATH Website www.glucosepath.com

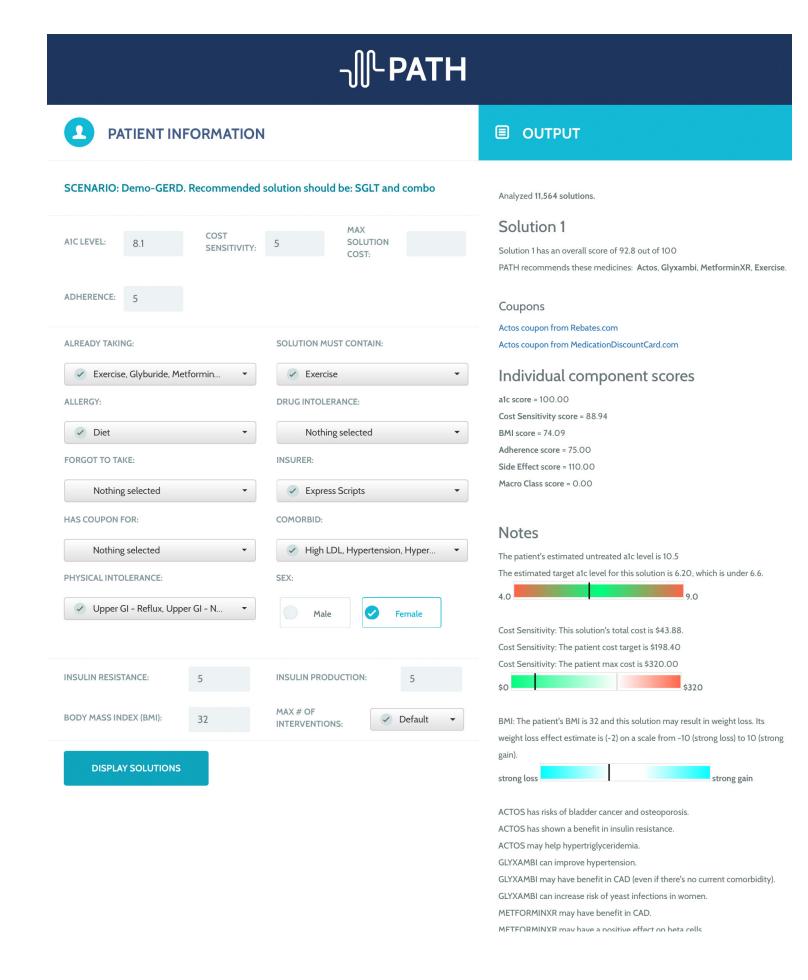
Our Approach

The AACE algorithm is strongest with a clear understanding of pharmacology and diabetes physiology. It may be challenging to use in a fastpaced office environment.

PATH is built on core principles very similar to AACE and designed to run quickly on an office's existing equipment, including desktop PCs, tablets, and

PATH displays a recommended course of therapy designed to reach a patient-specific a1c target.

Among the factors that PATH considers in its recommendation are:

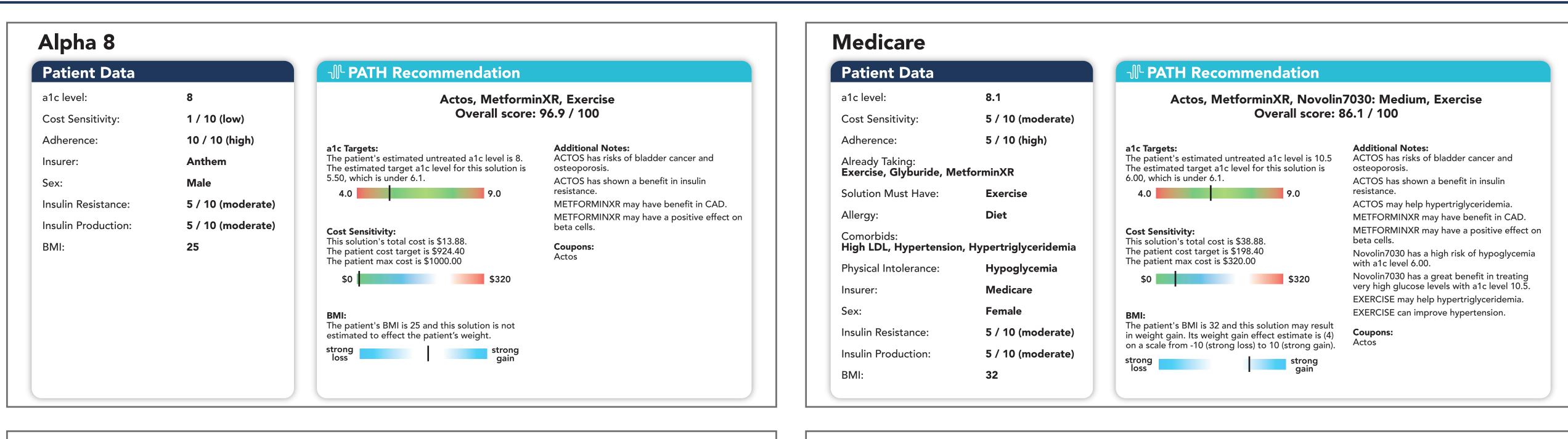


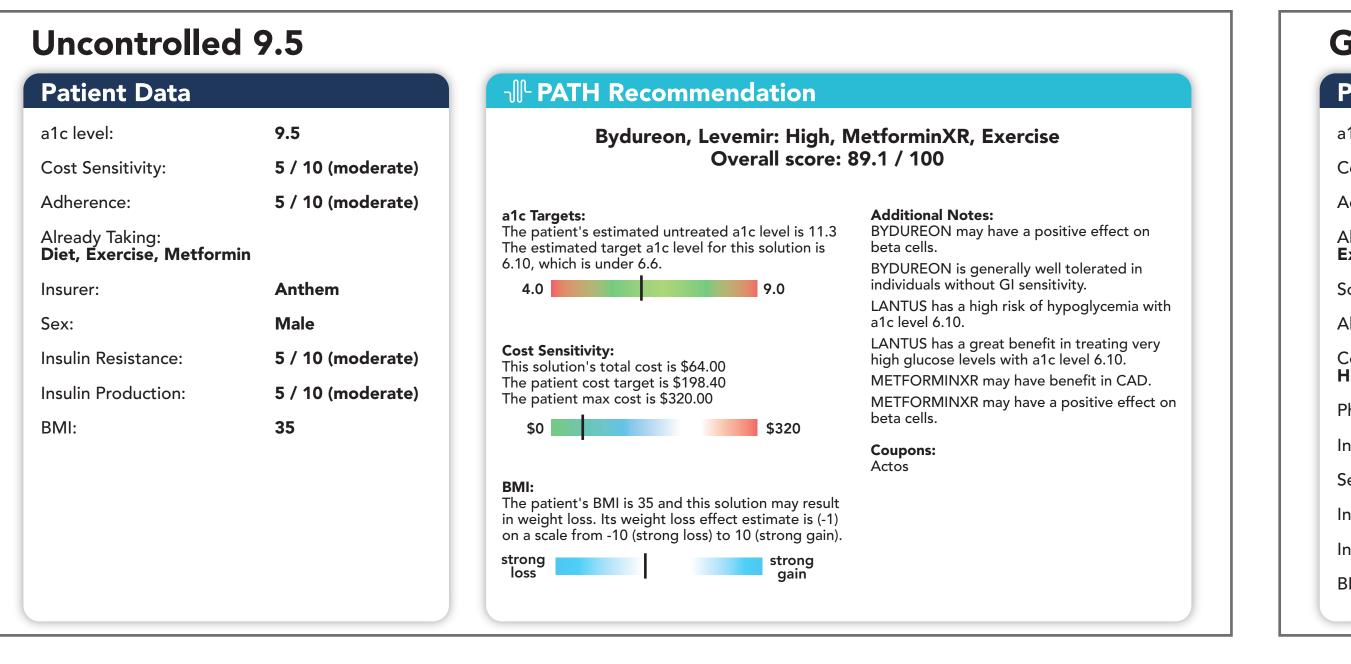
- Cost: Patient cost sensitivity, specific insurer coverage, coupons
- Adherence: Both historical and estimated future adherence
- Mechanism of Action: Complementary MOAs in combination therapies
- Side effects: Weight gain risk, hypoglycemia, beta cell preservation, more
- Intolerances: Physical, drug, and administration (e.g., injectables)
- Comorbidities: Both contraindications and beneficial side effects
- Simplicity: Prefers less complex regimens to boost adherence

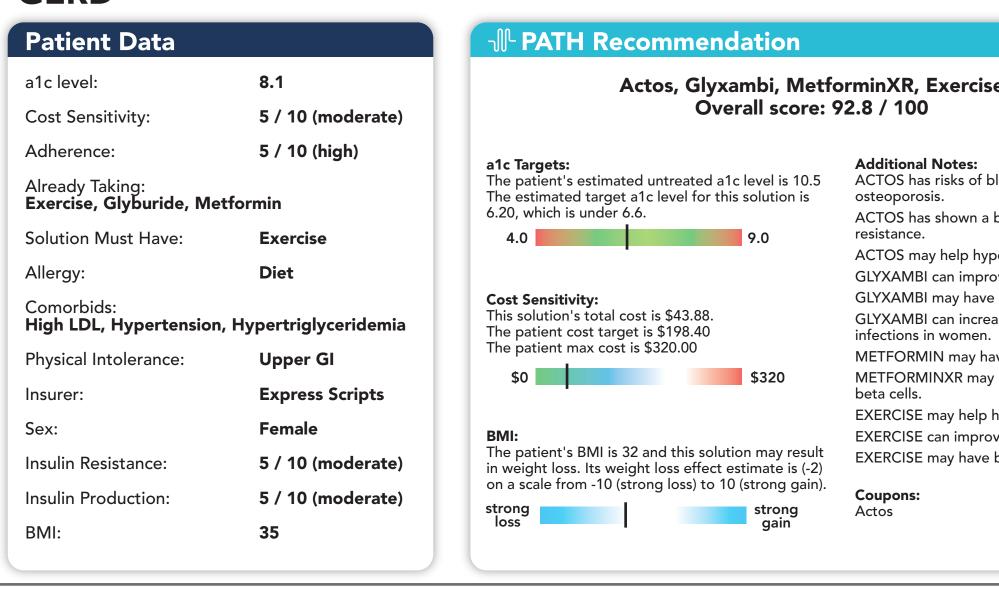
PATH evaluates millions of therapy combinations against these factors - in about a minute.

PATH displays up to 5 different solutions, the most likely to succeed first, along with pros and cons of each solution

PATH Example Scenarios







ACTOS has shown a benefit in insulin

ACTOS may help hypertriglyceridem

GLYXAMBI can increase risk of yeast

METFORMIN may have benefit in CAI

EXERCISE may help hypertriglyceridemi

METFORMINXR may have a positive effect