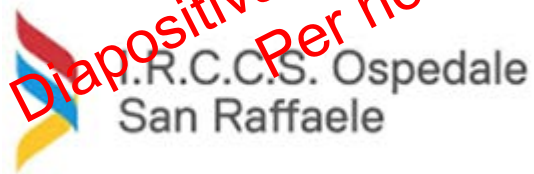
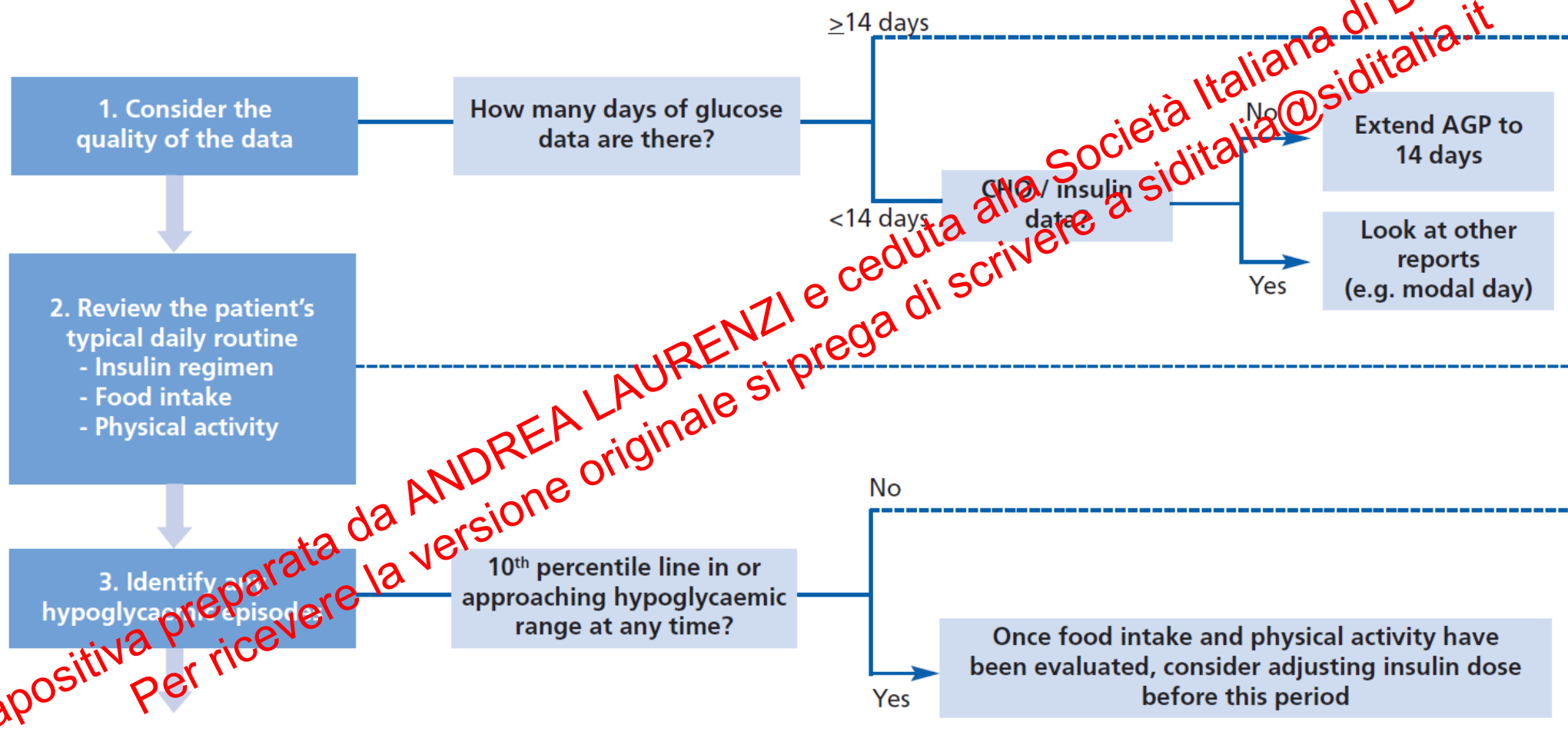


Gestione dei dati (scarico dei dati)

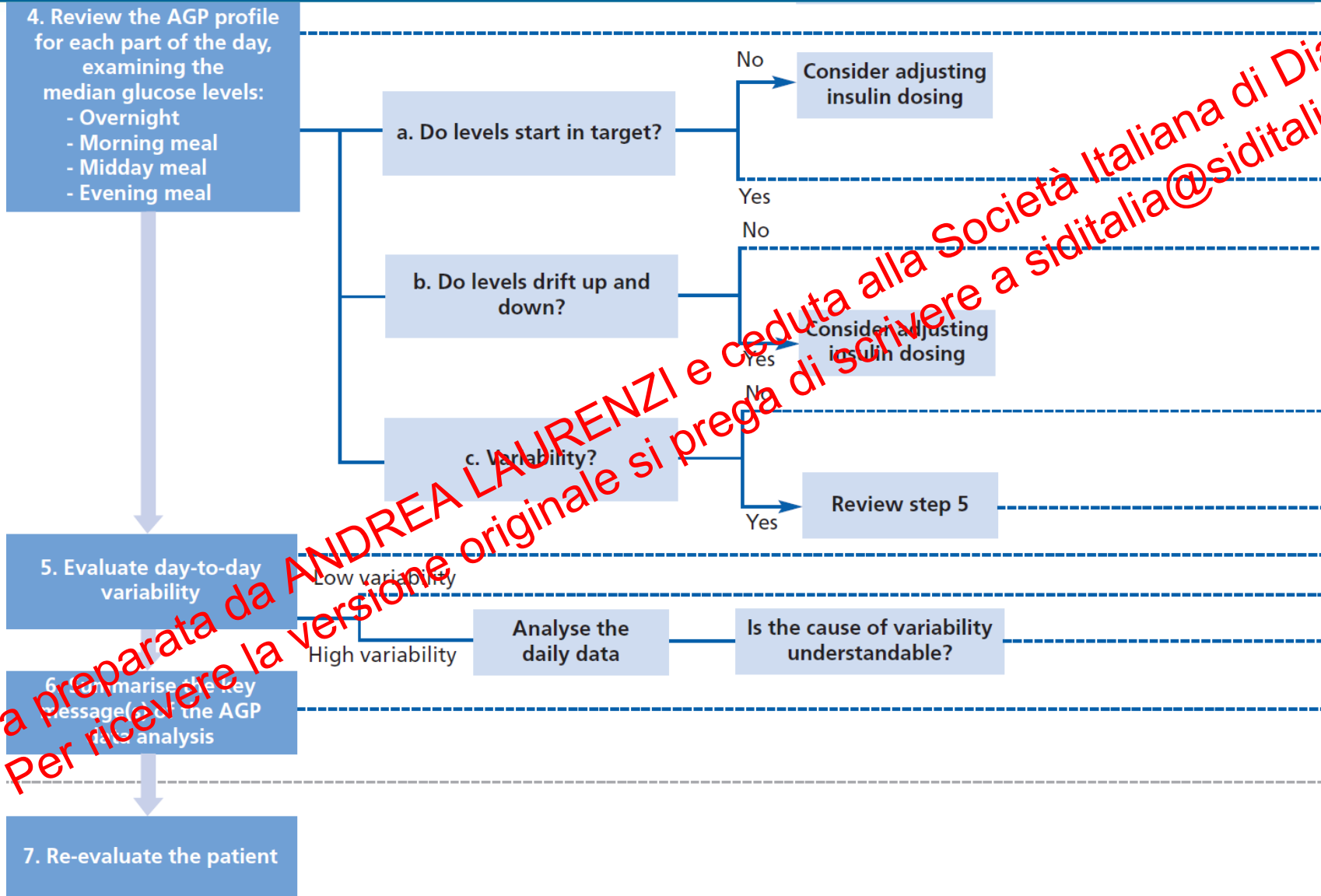
Andrea Laurenzi



I'AGP: analisi step by step



I'AGP: analisi step by step



step 1: verificare la qualità dei dati

Snapshot

8 September 2018 - 22 September 2018 (15 days)

Glucose

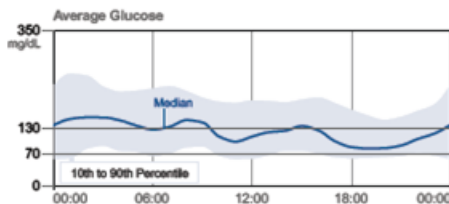
Estimated A1c **6.1% or 43 mmol/mol**

AVERAGE GLUCOSE **129** mg/dL

% above target **46** %

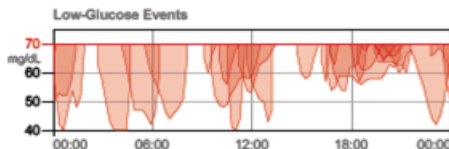
% in target **40** %

% below target **14** %



LOW-GLUCOSE EVENTS **20**

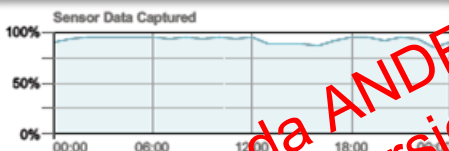
Average duration **157** Min



Sensor Usage

SENSOR DATA CAPTURED **94** %

Daily scans **6**



Logged Carbs

DAILY CARBS **59** grams/day

Logged Insulin

Rapid-Acting Insulin **8.9** units/day

Long-Acting Insulin **6.4** units/day

TOTAL DAILY INSULIN **15.3** units/day

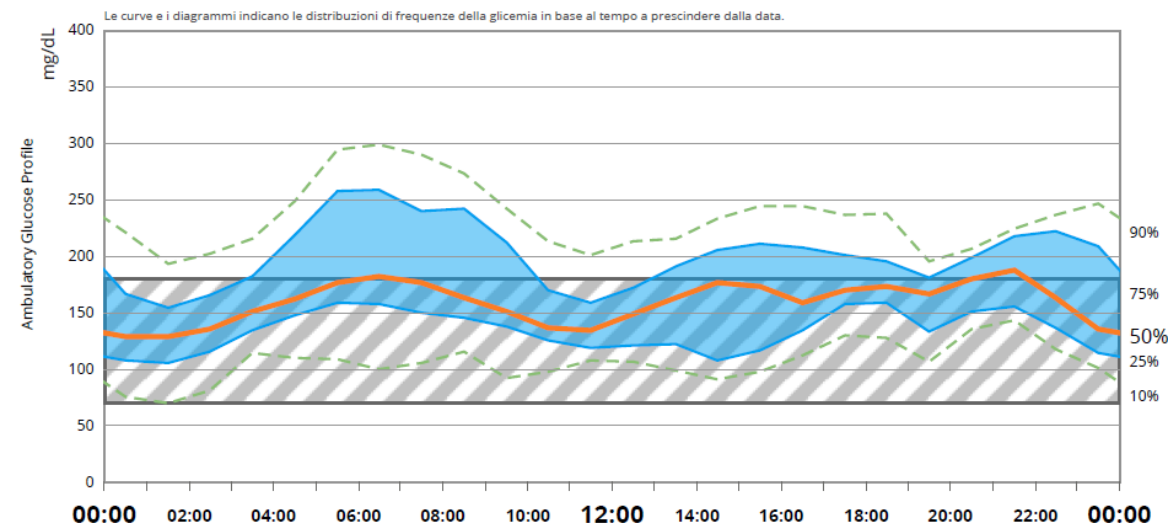
Glicemia media mg/dL	HbA1c stimolo
166	7,4%
Esposizione glicemica	

Molto bassa	Bassa	Nell'intervallo ottimale	Alta	Molto alta
< 54 mg/dL	< 70 mg/dL	70 - 180 mg/dL	> 180 mg/dL	> 250 mg/dL
0,2%	2,2%	64,7%	33,1%	7,2%
Intervallo glicemici				

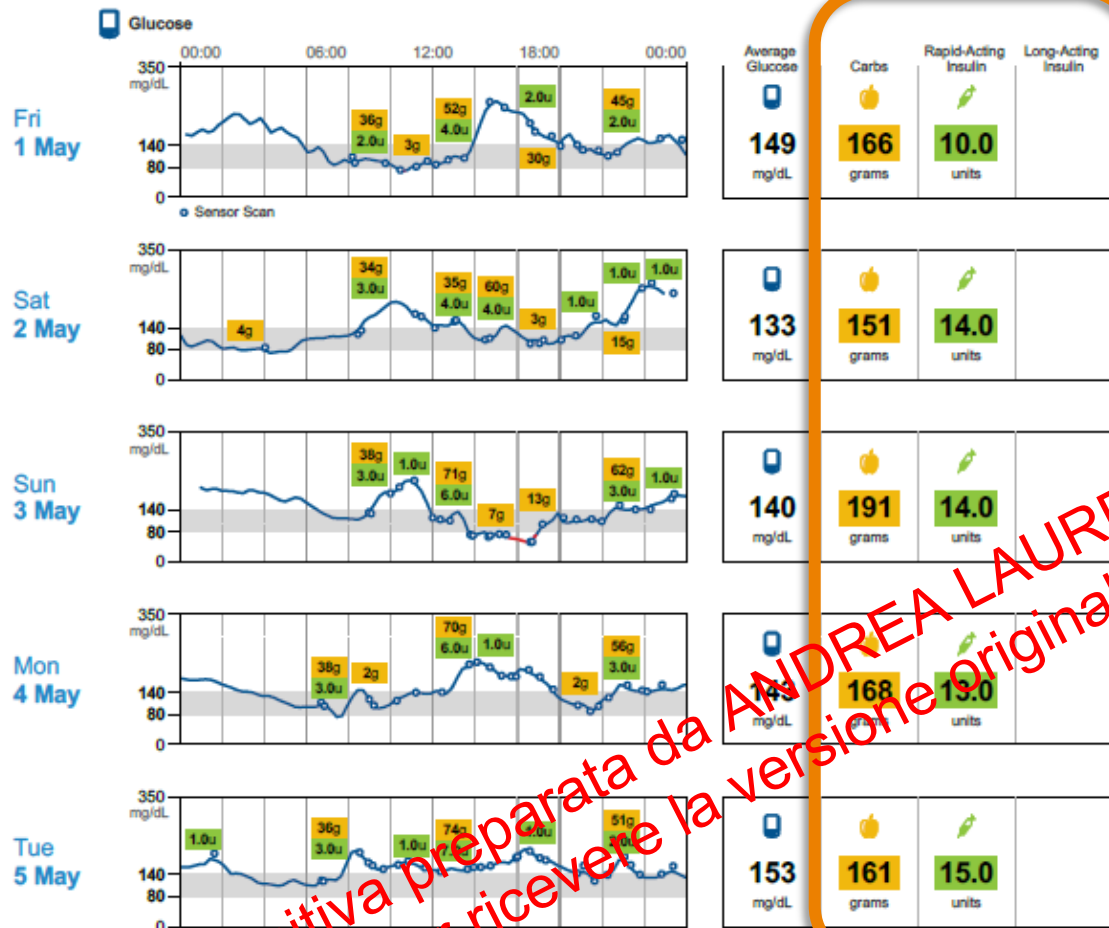
Coefficiente di variazione	DS mg/dL
30,7%	51
Variabilità glicemica	

Percentuale tempo di attività CGM
96,4%
Sufficienza dei dati

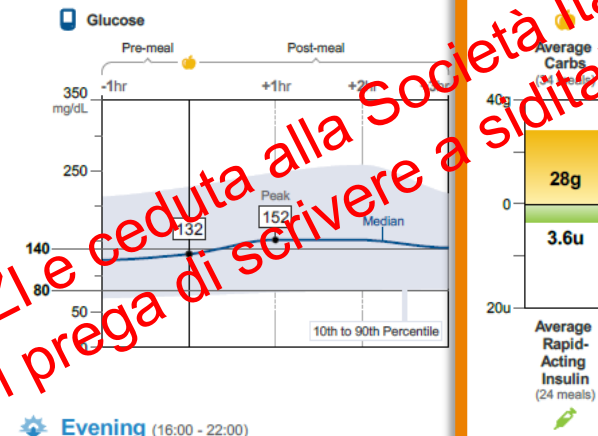
CGM | 50%: mediana | 25/75%: IQR | 10/90% | Intervallo ottimale



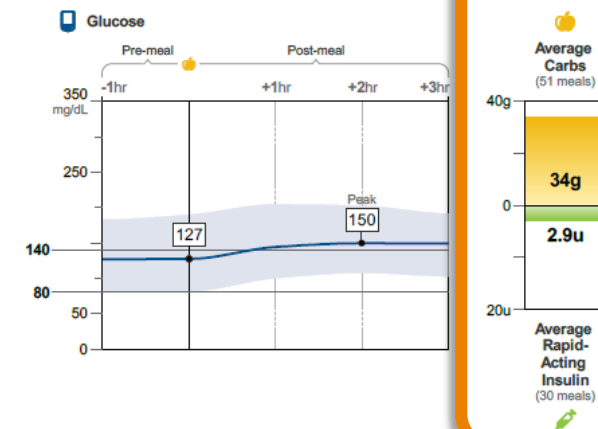
step 2: identificare le abitudini del paziente



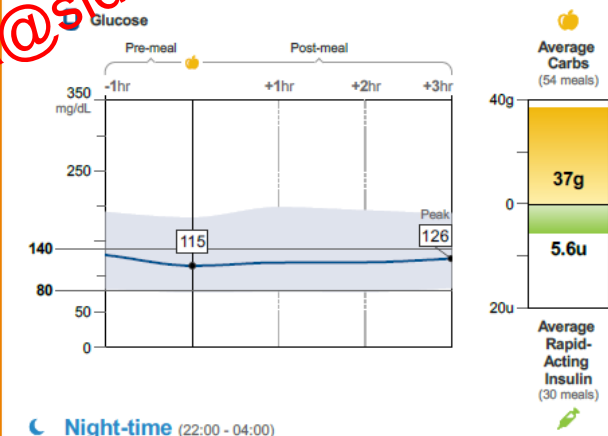
Morning (04:00 - 10:00)



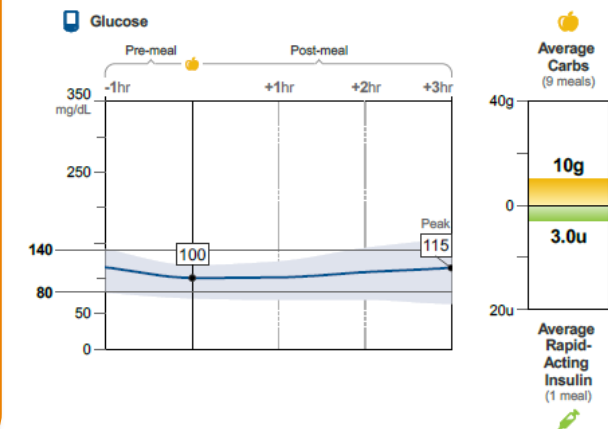
Evening (16:00 - 22:00)



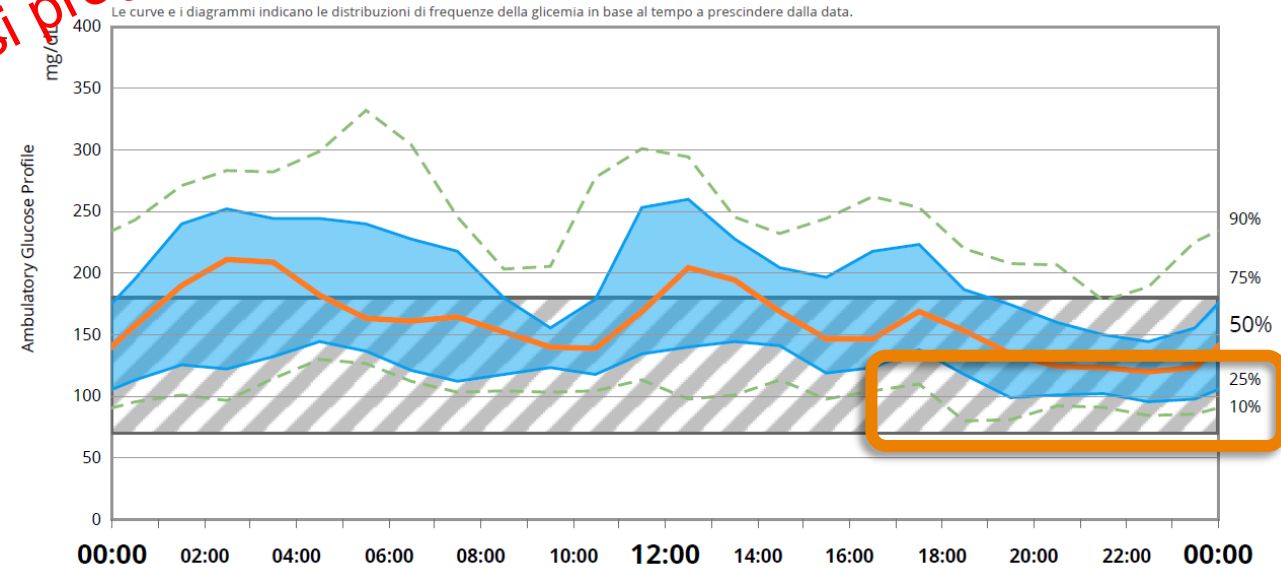
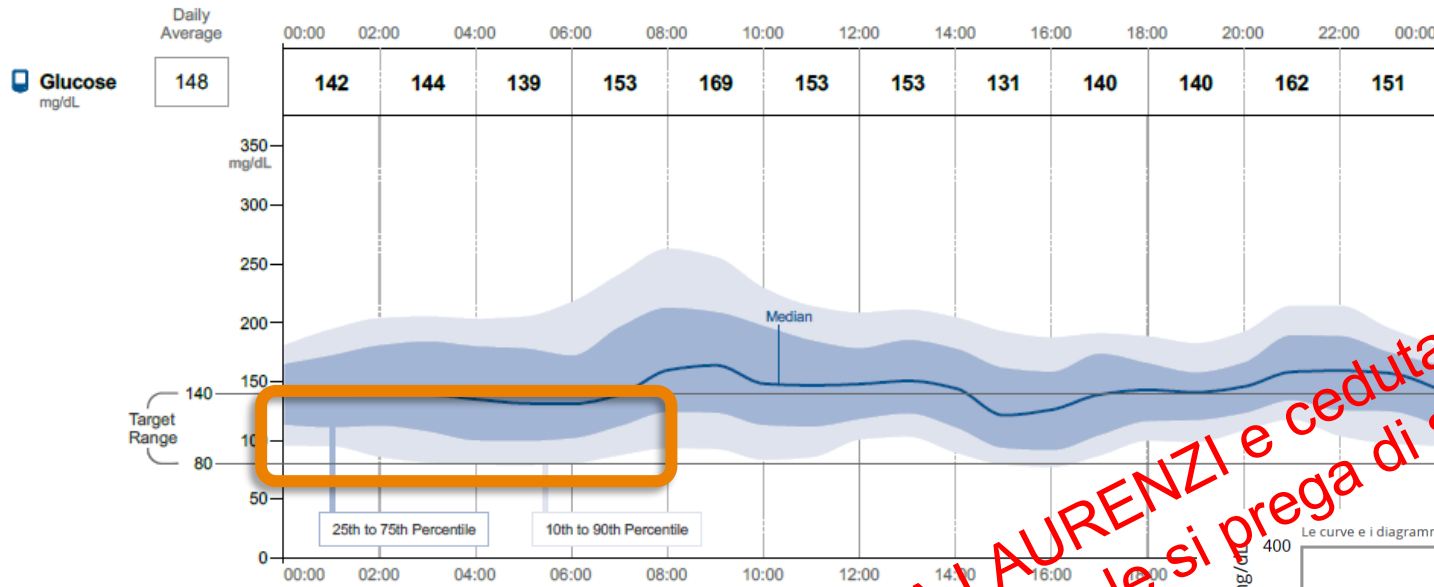
Midday (10:00 - 16:00)



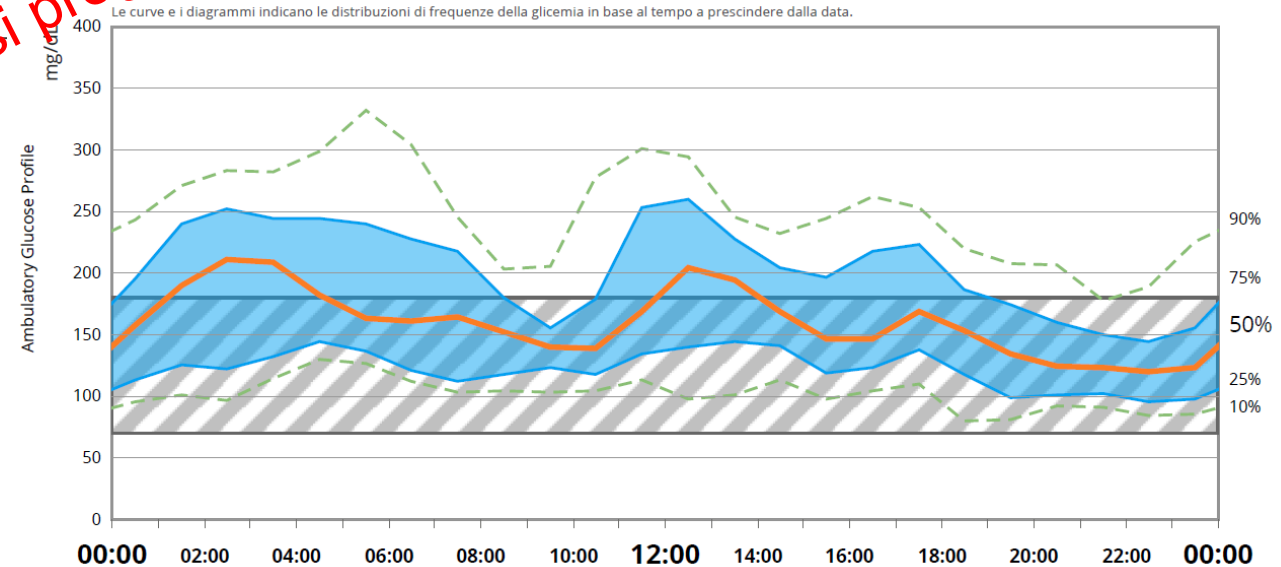
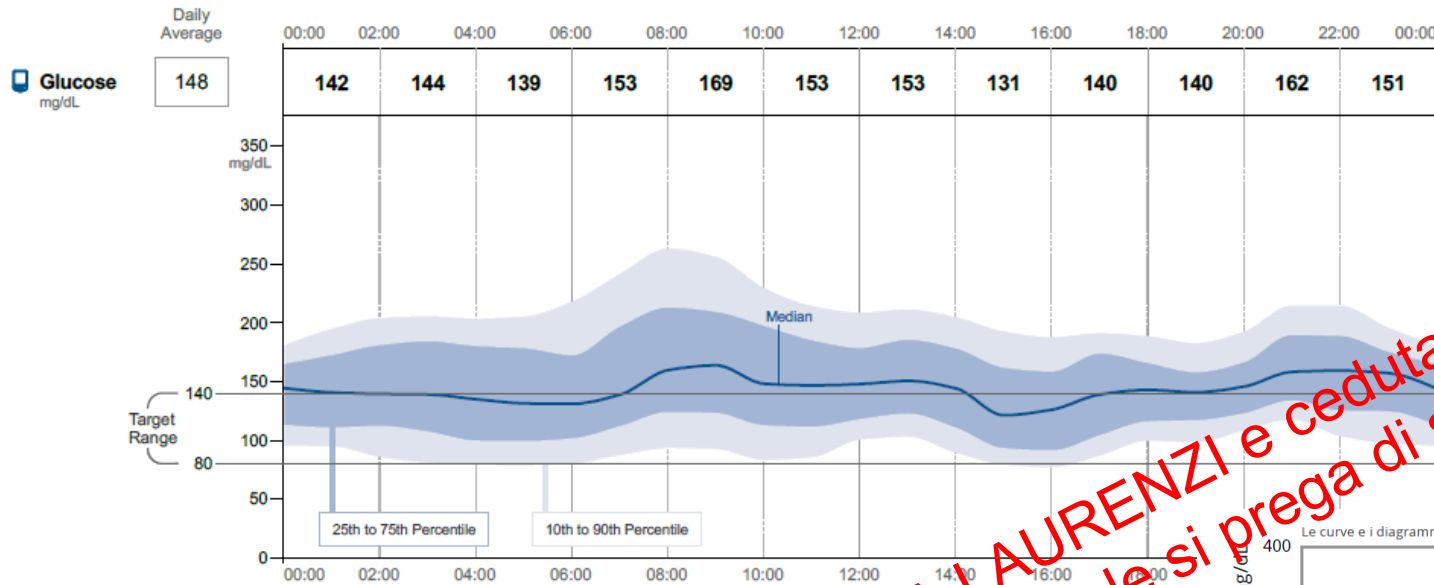
Night-time (22:00 - 04:00)



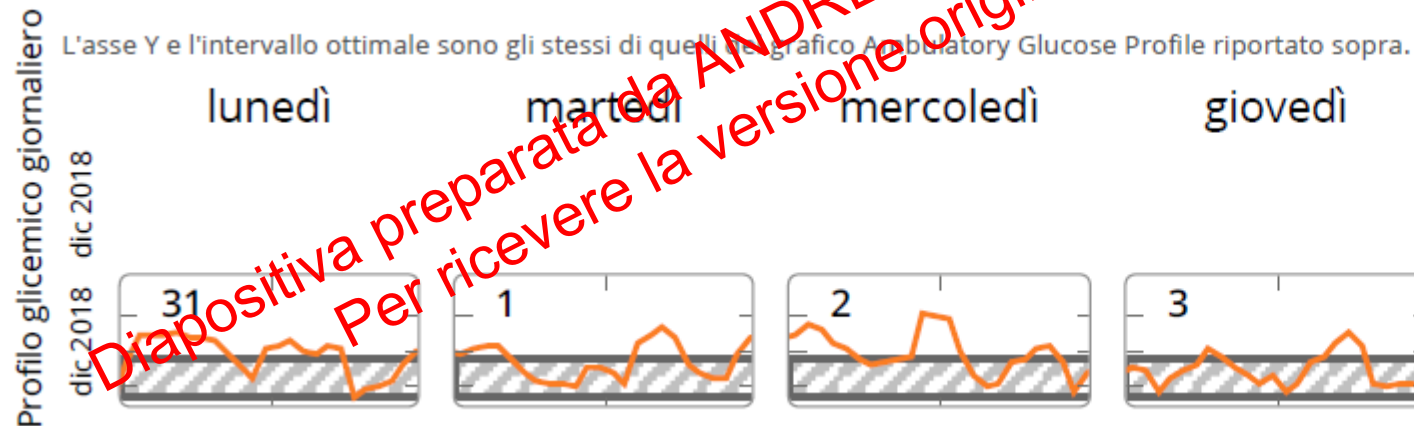
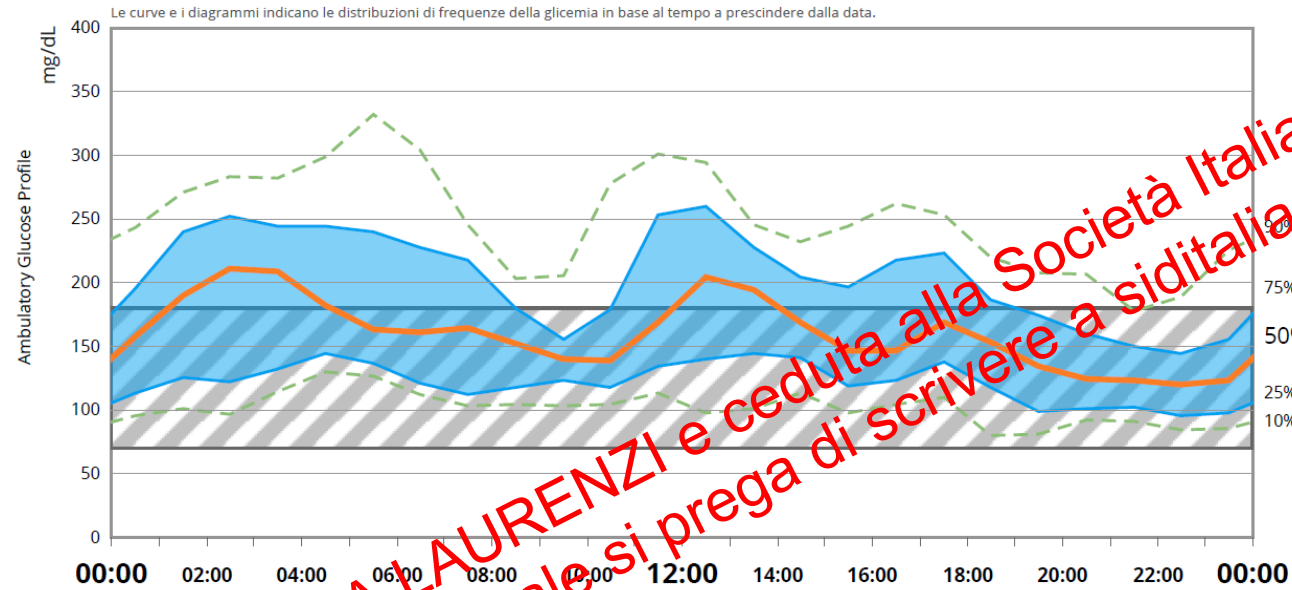
step 3: identificare le ipoglicemie



step 4: identificare i pattern glicemici



step 5: variabilità intergiornaliera



risultati

Time Savings Using a Standardized Glucose Reporting System and Ambulatory Glucose Profile

Deborah M. Mullen, PhD¹, Richard Bergenstal, MD¹,
Amy Criego, MD², Kathleen Cecilia Arnold, NP³,
Robin Goland, MD⁴, and Sara Richter, MS⁵

- Ogni device ha specifici cavi per il downloading e specifici software per il reporting dei dati glicemici
- Necessità di ottimizzare i tempi di scarico e interpretazione dati
- Due ospedali in America hanno sperimentato un percorso di scarico dati ottimizzato
- L'utilizzo dell'AGP per l'interpretazione dati ha fatto risparmiare 3 minuti per paziente