

Advancing Diabetes Care With Incretin-Based Therapies: A Clinical Practice Assessment

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Introduction

One of the goals of continuing professional development is to acquire and retain knowledge that will affect clinical practice and patient health outcomes. The following case challenge is a clinical self-assessment presented as an educational activity for continuing medical education (CME) credit. The patient cases are based on current evidence-based data and designed to test your current knowledge, skills, and attitudes in the treatment of people who have type 2 diabetes mellitus (T2DM).

An estimated 23.6 million people in the United States are affected with T2DM. With recent advances in diabetes care, understanding the newest data in regard to diagnosis and treatment and integrating them into clinical practice, where appropriate, can have a significant effect on patient health outcomes. We invite you to test your knowledge of T2DM. Please note that these questions have been designed for assessment, and you will not be penalized for answering the questions incorrectly.

Data from this survey activity will help facilitate recommendations for future educational activities that will best meet the educational and clinical performance gaps identified. This case-based activity is part of a curriculum series on management of T2DM and the role of incretin-based therapies, specifically the glucagon-like peptide (GLP)-1 agonists in meeting the unmet needs of people with T2DM. Why not assess your clinical practice and earn CME credit in the process?

Your participation in this initiative is greatly appreciated.

(Please note that this activity is designed to provide feedback only for certain questions in the self-assessment.)

Case #1: *Roger is a 58-year-old, white man with hypertension and hyperlipidemia, for which he takes lisinopril 20 mg daily and simvastatin 20 mg daily, who was just diagnosed with type 2 diabetes mellitus (T2DM) through routine screening. His fasting plasma glucose (FPG) is 140 mg/dL and his glycated hemoglobin (A1c) level is 8.3%. Physical examination reveals normal blood pressure and a body mass index (BMI) of 33 kg/m²; the rest of his exam, including ophthalmologic exam, is normal. Laboratory studies show normal kidney function. His electrocardiogram is normal.*

Om het artikel verder te kunnen lezen moet je de multiple choice vragen [oplossen](#).

Suggested Reading List

Pathophysiology of T2DM

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