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THE PANORAMA PAN-EUROPEAN SURVEY OF TYPE 2 DIABETES - PATIENT VS DOCTOR RATINGS OF PATIENTS' TREATMENT SATISFACTION

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AIMS: PANORAMA, a pan-European cross-sectional survey (sponsored by AZ/BMS) of pts with type 2 diabetes (T2D) included reports of treatment satisfaction (TS) by patients (pts) and doctors (drs). **METHODS:** Pts aged ≥ 40 yr, diagnosed >1 yr, treatment unchanged for ≥ 3 months were selected randomly or consecutively from medical practices in 8 countries. All pts received diet/exercise advice, and most were also prescribed 1, 2 or 3+ oral hypoglycaemic agents (OHAs) and/or injectables (insulin regimens or GLP-1 receptor analogues), producing 13 treatment grps. Pts completed the 8-item Diabetes TS Questionnaire (DTSQ). Drs completed the DTSQ without knowing pt responses. DTSQ items 1 and 4-8 assessed TS (range 0 very dissatisfied to 36 very satisfied). Items 2-3 measured perceived frequency of hyper- and hypoglycaemia. (0=none of the time; 6=most of the time). Correlation coefficients were computed overall and by treatment grp. **RESULTS:** 5156 pts: (47.8% women, age [mean \pm SD] 65.9 \pm 10.3 yr, time since diagnosis 9.0 \pm 7.4 yr). TS was 29.9 \pm 6.1 for pts and 27.7 \pm 5.9 for drs ($r=0.37$; $p<0.001$ overall). Drs rated TS less than pts ($p<0.001$), and recognised pts were most satisfied with diet alone, then with 1 OHA but did not appreciate pts' reduced TS with insulin regimens when OHAs were included. Pts rated BID premixed insulin+OHAs as least satisfactory. Dr- and pt-perceived frequency of hyperglycaemia correlated significantly in 12/13 grps ($p<0.018$). Drs tended to underestimate frequency of hyperglycaemia perceived by pts, significantly for the 2 least intensively treated OHA grps ($p<0.029$). Dr- and pt-perceived frequency of hypoglycaemia scores correlated significantly in 11/13 grps but drs tended to underestimate hypoglycaemia in 10/13 grps, particularly in pts using bolus insulin+OHAs ($p<0.003$). **CONCLUSIONS:** Mean TS scores for the DTSQ in PANORAMA showed moderate correlations though significant differences between pt and dr scores. Pts reported more hypo- and hyperglycaemia than drs recognised, despite being more satisfied with treatment than perceived by drs.

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