

# TheMARK

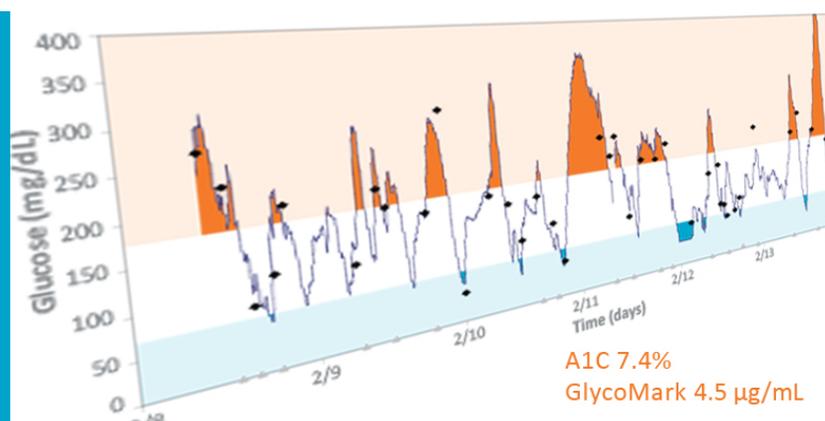
## GlycoMark Updates for Healthcare Professionals Caring for Patients with Diabetes

DIABETES MANAGEMENT

Issue 10 - July 2018

### A Study Update on Hyperglycemic Excursions and the GlycoMark Test

Nearly 40% of patients with “good” glycemic control may be experiencing postprandial hyperglycemia or glycemic variability.<sup>1,2</sup>



Dear GlycoMark Subscriber,

More than 500 studies show low GlycoMark test results reveal hyperglycemic excursions (occurring while fasting, postprandial, or both) that are **not evident with A1C**.

Even after adjusting for A1C and various risk factors, multiple clinical studies strongly associate low GlycoMark test results with diabetes related complications and other outcomes. In this month's update, we have compiled several outcome studies - some of which have been published within the last 12 months.

#### Retinopathy and Nephropathy

The Selvin et al. 2014 analysis of over 11,000 participants in the Atherosclerosis Risk in Communities (ARIC) study revealed low GlycoMark test results were independently associated with retinopathy and kidney disease.<sup>3</sup>

#### Cardiovascular Disease and Mortality

In another analysis of over 11,000 participants in the ARIC study, the 2016 study by Selvin, et al. revealed low GlycoMark test results were independently associated with cardiovascular disease and mortality in patients with diabetes.<sup>4</sup>

#### Stroke and Heart Failure

The recent 2017 original investigation of 388 consecutive patients by Ouchi, et al. revealed low GlycoMark test results were associated with risk of long-term coronary heart disease, stroke, heart failure and cardiac mortality.<sup>5</sup>

#### Cognitive Decline

In the 2017 analysis of the ARIC study of nearly 13,000 patients, Rawlings et al. showed a 16% increased risk of dementia with each 5 µg/mL decrease in the GlycoMark test result in patients with diabetes.<sup>6</sup>

#### Hypoglycemia

In the 2017 study of 1,206 patients, Lee et al. found that glycemic variability, as

determined by low GlycoMark test results, was strongly associated with severe hypoglycemia in older adults with diabetes.<sup>7</sup>

### **Macrosomia (high birth weight)**

In the 2013 study of 82 pregnant patients, Nowak et al. reported a nearly 22% improvement in diagnostic accuracy for identifying patients at higher risk of macrosomia when adding the GlycoMark test with A1C, particularly in the 3rd trimester.<sup>8</sup> (AUC 0.69 for A1C alone, compared to 0.84 for A1C combined with GlycoMark)

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## Join Us! Upcoming Sponsored Events:

### **Attending - American Association of Clinical Chemistry (AACC 2018) 70th Annual Scientific Meeting & Clinical Lab Expo**

July 29-August 2, 2018 - Chicago, IL

### **Exhibiting - American Association of Diabetes Educators (AADE 2018)**

August 17-20, 2018 - Baltimore, MD

### **Exhibiting - American Association of Clinical Endocrinologists (AAACE) 11th Annual Meeting New Jersey Chapter**

October 6, 2018 - Princeton, NJ

[Click here](#) to schedule time to meet with the GlycoMark team.

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## How to Order the GlycoMark Test:

The GlycoMark test is reimbursed by federal, state and private payers (CPT Code 84378) and available through various national and regional laboratories, and as a test kit for use on most automated chemistry instruments. [Click Here](#) for more information!

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<sup>1</sup>Erlinger TP, Brancati FL. Diabetes Care. 2001 Oct;24(10):1734-8. <sup>2</sup>Bonora E, et al. Diabetologia. 2006 May;49(5):846-54. <sup>3</sup>Selvin E, et al. Clin Chem. 2014 Nov; 60(11): 1409–1418. <sup>4</sup>Selvin E, et al. Diabetes 2016;65:201–208. <sup>5</sup>Ouchi S, et al. Cardiovasc Diabetol. 2017; 16: 151. <sup>6</sup>Rawlings AM, et al. Diabetes Care 2017 Jul; 40(7): 879-886. <sup>7</sup>Lee AK, et al. Diabetes Care 2017 Dec; 40(12): 1661-1667. <sup>8</sup>Nowak N, et al. Diabetologia 2013 Apr; 56(4): 709–713.

The Mark newsletter is distributed to healthcare professionals that treat and manage patients with diabetes, and contains the latest updates and important references for the GlycoMark test. This is a complimentary publication provided through the generous support of GlycoMark, Inc.

The information contained herein is not medical, diagnostic or treatment advice for any particular patient. Physicians should use their clinical judgment and experience when deciding how to diagnose and treat patients and in the use of the GlycoMark test in the treatment of the patient. Please refer to the GlycoMark product insert for more information.

The GlycoMark test is FDA cleared for professional use to provide quantitative measurement of 1,5-anhydroglucitol (1,5-AG) in serum or plasma. The GlycoMark test is intended for intermediate-term monitoring of glycemic control in patients with diabetes. It is not intended to be used to diagnose disease or identify patients that will experience complications of diabetes or the likelihood of experiencing complications.

The information above contains general reimbursement information only and is not legal advice, nor is it advice about how to code, complete, or submit any claim for payment. Providers have the ultimate responsibility for all aspects of coding and billing.

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