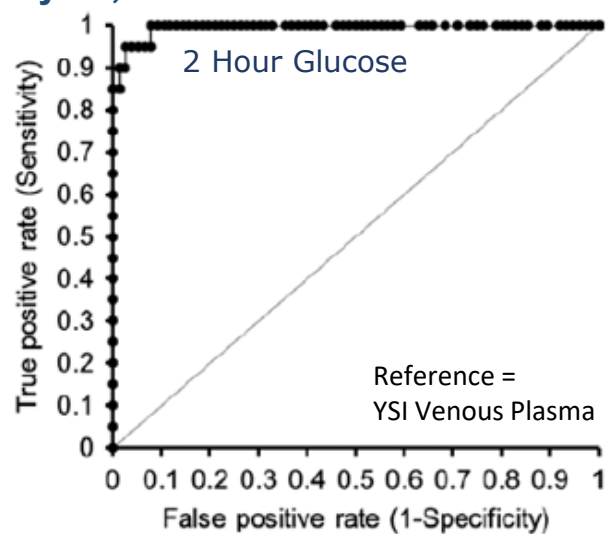
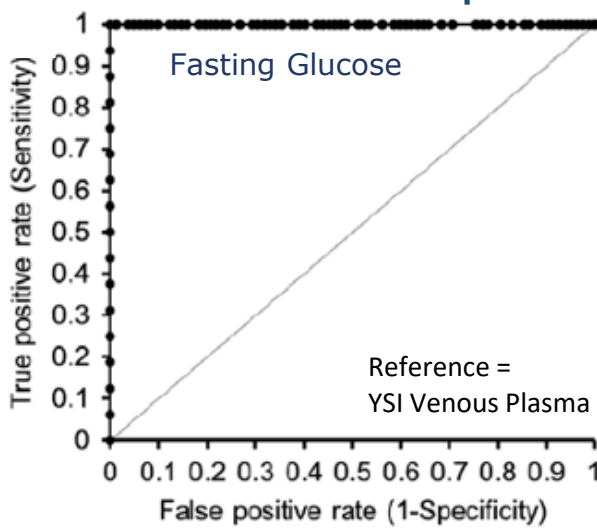


Sensitivity & Specificity for IGT & Type 2 Diabetes

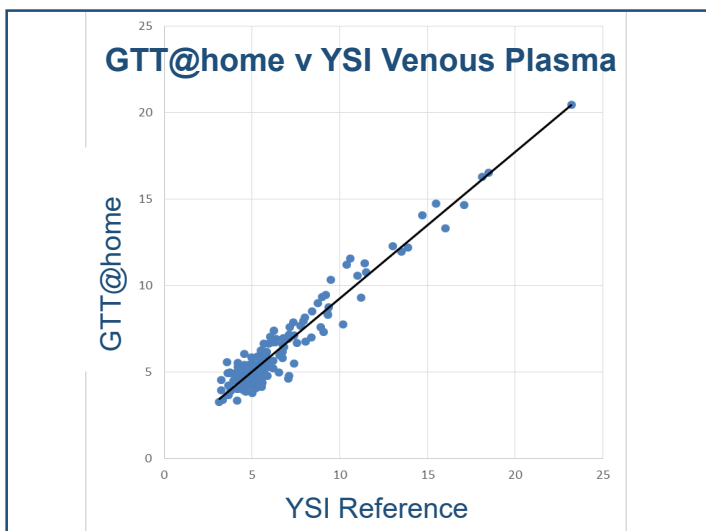
	Sensitivity	Specificity	Positive Predictive Value, PPV	Negative Predictive Value, NPV
Fasting Plasma Glucose ≥ 6.1 mmol/l (Prediabetes)	1.00	0.99	0.94	1.00
2 hour Plasma Glucose ≥ 7.8 mmol/l (Prediabetes)	0.90	0.99	0.95	0.97
2 hour Plasma Glucose ≥ 11.0 mmol/l (Type 2 Diabetes)	0.93	0.99		

Receiver Operator Analysis; ROC Curves



ROC curves, sensitivity and specificity are excellent

Method Comparison & Analytical Parameters



Analytical Parameters

Correlation Coefficients:

Fasting $R = 0.94$, $R^2 = 0.88$

2 Hour $R = 0.97$, $R^2 = 0.94$

Combined $R = 0.96$, $R^2 = 0.93$

Overall Bias:

Fasting -1.4% 2 Hour -0.5% Combined -1.0%

Kappa Reliability Statistic:

Fasting 0.96 2 Hour 0.90 Combined 0.88

“Excellent correlation and low bias compared to a reference laboratory glucose analyser”

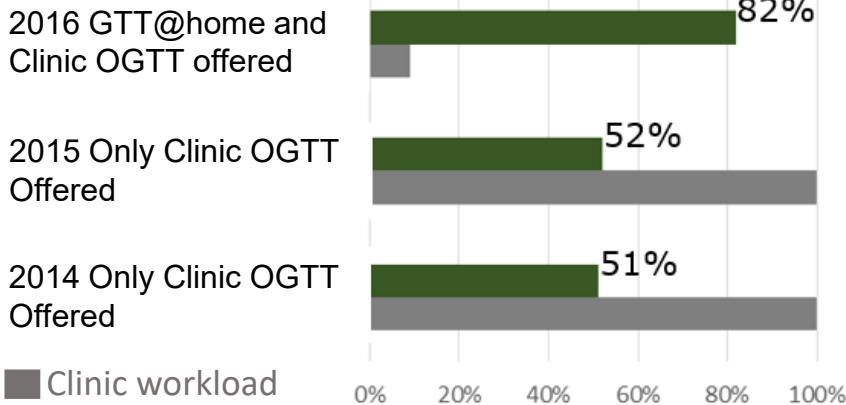
GTT@home shows very good agreement with the gold-standard laboratory OGTT and has high sensitivity and specificity

Uptake, Patient Preference and Ease of Use: ADA Poster 2017

University College London

Evaluation at Great Ormond Street Hospital; screening young cystic fibrosis patients for diabetes. Objective was to see if GTT@home could improve screening rates.

Screening Uptake at Great Ormond Street



When GTT@home was offered, uptake went up by 60%, with 91% of those tested opting for Home OGTT

All patients using GTT@home who have had a previous clinic OGTT preferred GTT@home

All 32 patients successfully used the GTT@home device and judged it easy to use

Field Test, Isle of Man, Reported 2016

Ramsey Group Practice, Isle of Man

Objective was to see if GTT@home was easy to implement and easy for the public to use for diabetes and risk of diabetes, administered within a GP clinic setting.

54 adults were screened for diabetes risk. GTT@home was offered to those with moderate or high risk. 15 people used the test kit at home and returned Data Records for analysis.

There was a very high level of satisfaction with the test kit, which was judged easy to use. In this small group, one case of diabetes and one case of IGT were identified.

Evaluation Results: Diabetes Care, June 2013

Diabetes Trials Unit, University of Oxford

- GTT@home was easy to use, liked by patients and preferred to clinic OGTT
- No difference was between untrained at-home users and experienced users
- GTT@home results were comparable regardless of where the test was conducted

Summary

- Equivalent performance to clinic OGTT
- Universally easy to use without training
- Universally liked; preferred by patients
- Delivers major increase in test uptake
- Delivers substantial increase in sensitivity and specificity compared to the alternatives to clinic OGTT – fasting glucose and Hb A1c