

# Under Control

While there is no single solution to the diabetes pandemic, Jay Warner at CeQur remains positive for a future of simple and effective management of the disease. Here, he tells *PMPS* why more convenient devices are key to helping patients control their condition



Jay Warner is Senior Vice President, Commercialization at CeQur. His career in diabetes marketing and sales spanned 20 years at Eli Lilly & Company, where he served as leader for the US Byetta brand team and head of US and Global Diabetes Market Research. While at Eli Lilly, Jay was instrumental in the successful launch of more than seven new diabetes products.

## **PMPS: Why is diabetes such a huge concern today?**

**Jay Warner:** Unfortunately, type 2 diabetes (T2D) is pandemic and progressive. Doctors prescribe various therapies for patients throughout the course of the disease – but, eventually, most patients need insulin to gain or stay in control of their blood sugar. More than 11 million people in the US and EU take insulin injections every day to manage T2D, and this number is expected to grow. While insulin is amazingly effective, data suggest that approximately 50% of the individuals that require it do not achieve appropriate glycaemic control (1). Poor glycaemic control is associated with additional healthcare costs and a high risk of disabling complications (2).

## **What issues do diabetics face in managing their medication?**

All medications have challenges. With insulin dosing, optimisation and adherence are among the key barriers to improving glycaemic control for people with diabetes. Insulin also needs to be kept cool and accessible to the user, and must be self-titrated and self-injected throughout the day. It is not surprising that a study published in the journal *Diabetes Care* found that half of all people who require multiple daily injections (MDI) of insulin intentionally skip doses because they consider injections embarrassing, inconvenient, painful and/or disruptive to their daily activities (3).

In a recent market report commissioned by CeQur, doctors reported that the most challenging aspects of managing people with T2D are ensuring compliance with the prescribed therapy, and finding therapeutic options that patients can afford and easily learn and follow.

## **How can these problems be tackled?**

These issues can be overcome – for the most part – by providing T2D patients with convenient, cost-effective and usable alternatives to MDI. Discreet, reliable devices that provide continuous subcutaneous insulin infusion (CSII) could help many people better manage their therapy, thereby improving their glycaemic control and long-term health.

## **Can wearable technology improve insulin users' control and adherence?**

Yes. Data from a recent, large-scale, controlled clinical trial – which compared a CSII device to MDI among patients with poorly-controlled T2D – demonstrated CSII superiority over MDI, as measured by glycated haemoglobin levels after six months (4).

In addition, an initial study of CeQur's PaQ® – a wearable device that provides three days of consistent, basal insulin delivery, combined with on-demand bolus insulin (in other words, CSII) – indicated that the device improves glycaemic control among people with T2D, when compared to MDI.

## **Doesn't wearable technology come with its own problems?**

The fact that technology is 'wearable' means it needs to both perform and adhere comfortably as the user sleeps, showers and actively lives their day. Wearable diabetes technologies are evolving and improving as we gain experience with them. CeQur has been fortunate to be able to learn from, and improve upon, earlier devices. I think the more astute companies in our industry test and evaluate products methodically, to learn as much as possible about the end-user and optimise their devices over time. CeQur has taken the time to do this with PaQ, and it has paid off immeasurably.

## **Do you think there also needs to be a cultural change in attitude towards managing diabetes, or is the drug delivery device the main factor to be overcome?**

Diabetes is a huge obstacle to navigate, and there is no single answer to solve the pandemic. Managing the condition effectively day-to-day

is extremely difficult. I think it is likely that a shift in attitude towards diabetes management will come as we are able to offer patients more convenient, efficacious treatments and technologies. Helping them to be successful may create motivation and encouragement.

**What technology are we likely to see appear on the market over the next 10 years?**

It will be interesting to see how smartphones and wearable technology will be integrated into healthcare. A doctor should be able to virtually prescribe exercise or 'steps', and then monitor progress – if the patient permits it.

**From your own perspective, what would you like 2016 to bring?**

I would like 2016 to bring regulatory approval of our commercial device, published results from our ongoing clinical study, and the beginning of our US launch. For diabetes in general, I would like to see the continuation of the trend towards simpler, more effective therapies and technologies for people with T2D.

**Which aspect of your job do you find most challenging?**

Establishing a new class of simple insulin delivery devices has been challenging – and doing it in a start-up environment makes it even more so. But, quite frankly, it also makes the process more fun, because it requires greater creativity. People who participated in the initial PaQ clinical studies, as well as doctors treating people with T2D, are strongly encouraging our pursuit, which is exciting.

**What is the most important lesson you have ever learnt?**

To be successful managing diabetes, we need to celebrate small successes over the disease every day.

**References**

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