

To Test or not to Test – Monitor Trial Results Published

The first large pragmatic trial of daily glucose monitoring in non-insulin dependent type 2 diabetics did not offer a significant advantage in blood sugar control or quality of life. The results of this PCORI-funded study were published in [JAMA Internal Medicine](#) and presented at the ADA conference in San Diego. [Video Interview](#) from the JAMA Report.



450 patients from primary care practices in North Carolina were randomized to one of three groups: no testing, once daily testing, or enhance once daily testing with tailored messages of encouragement or instruction.

“There was no difference between either type of testing,” said UNC endocrinologist Laura Young, MD, PhD, the paper’s first author. “Enhanced Self-Monitoring Blood Glucose, in the pragmatic setting of regular daily life, offered no additional health benefits.”



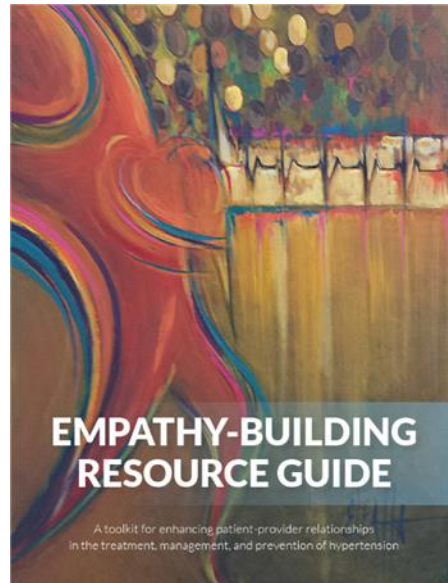
[The Editors of JAMA Internal Medicine](#) noted, “The surprising findings make us question the current seemingly common sense–based strategy to encourage routine SMBG. These findings and others support the Choosing Wisely recommendations of the Society of General Internal Medicine and Endocrine Society that discourage frequent blood glucose monitoring among patients with type 2 diabetes.”

Katrina Donahue has been invited to present these findings at the 2017 PCORI Annual Meeting this fall.

Treating Hypertension with Empathy

We often hear about the role of medications and lifestyle in preventing and treating hypertension, but what about empathy?

Indeed, studies show that healthcare providers’ empathy behaviors can affect patient health outcomes. The Hypertension Empathy-Building Resource Guide was designed to provide providers with useful resources for working empathetically with patients at-risk of or being treated for hypertension.



This annotated guide provides summaries and links to resources including journal articles, videos, assessments, and toolkits aimed at enhancing patient-provider communication, shared decision-making, and provider support for patient self-management of

hypertension. The guide was developed by community experts in collaboration with NC TraCS and is available for download [here](#). (Note: Link opens to an optional survey, yes or no will lead you to a download page.)

“This toolkit is a great resource for all types of healthcare professionals. I strongly encourage you and your colleagues to use it.”

— Sidney C. Smith, Jr., MD FACC, FAHA, FACP
Professor of Medicine, Division of Cardiology
University of North Carolina at Chapel Hill

The Road to Tolerance and Understanding – Joint Publication

Pediatrics, Academic Pediatrics and the Journal of Adolescent Health simultaneously published [an important commentary](#) outlining specific steps that the pediatric community can take to increase tolerance and understanding to make this world a better one for our children.

Leaders from the Society for Adolescent Health and Medicine (SAHM), American Academy of Pediatrics (AAP), Academic Pediatric Association (APA) and the American Pediatric Society (APS), including SAHM's president, and NCNC's Pediatric and Adolescent Director Dr. Tamera Coyne-Beasley, have released a statement urging the entire child and adolescent health community to embrace tolerance and understanding in the name of human progress.



All adolescent health professionals can take steps to lead the way towards tolerance and understanding. These include:

- transforming offices into safe havens and explicitly welcome families who are different, ostracized, or disrespected in modern society
- validate the worth and importance of children,
- and deepen our understanding of families who appear to devalue science," says the statement.

Dr. Coyne-Beasley states, "it is the implicit bias and explicit racism and other forms of discrimination that are gravely impacting the health and well-being of our adolescents and their families. As providers, this is something that we should all strive to overcome in our research, training, education, advocacy and policy efforts."

E-CARE PBRN (in eastern NC) HAS A NEW TEAM MEMBER!



Lynette Staplefoote-Boynton, a medical student at ECU Brody School of Medicine, has joined the E-CARE team this summer. She previously worked with the COMPASS stroke project at Wake Forest University with UNC-CH and ECU. Lynette has been working with the E-CARE team to pilot test

and implement patient recruitment procedures for a large cluster randomized trial, the Southeastern Collaboration to Improve BP Control, evaluating three different intervention strategies to improve blood pressure control in African Americans with uncontrolled hypertension in rural practices. This multicenter trial involves the University of Alabama-Birmingham, UNC-CH, ECU, and Weill Cornell in New York will take place in 80 practices across Alabama and North Carolina.

Lynette recently presented the overall design of the trial at ECU's 2017 Medical Student Research Forum on August 7th, 2017. In addition, Lynette has applied for and been approved to enter a "Research Distinction Track". She will be working with the ECU study team over the remainder of her medical school career. She will be trying to understand more about how practice facilitation leads to behavior change by providers and effects BP control outcomes.

NCNC Spotlight: Madeline Mitchell



After 35 years of dedicated service to UNC-Chapel Hill Madeline Mitchell is retiring. We are grateful for her guidance and leadership. We wish her luck in her new adventures.

NAPCRG PBRN Conference



NCNC made several presentations to the 2017 North American Primary Care Research Group (NAPCRG) Practice Based Research Networks Conference on the following topics: Shared Decision

Making, Asthma Coaching, Colon Cancer Screening, Mobile Health Technology, HPV Vaccination and Identification and care of Hepatitis C and HIV patients.

Acknowledging our supporters:

NCNC would like to thank UNC's [Cecil G. Sheps Center for Health Services Research](#) and the [NC Translational and Clinical Sciences Institute](#) for all they do that make our work possible.