

Surprise: Seniors take to online DPP better than most adults

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More than half of Americans over 65, some 23 million people, have prediabetes. Nine in ten people with prediabetes don't know they have it. A recent study indicates an online intensive behavior counseling (IBC) program can help seniors lose weight and reduce their risk of type 2 diabetes and cardiovascular disease. Another key finding: Seniors had a higher participation rate than the total adult population. The program's creators cite appropriate design.

The study, published in *PLOS One*, looked at data on more than 1,100 overweight or obese seniors with additional risk factors for diabetes or heart disease who participated in an online IBC program created by San Francisco-based Omada Health Inc.

Participants started the program with an average age of 69 and an average body mass index of 32.5 kg/m². Six months later, average weight loss was 6.8 percent for all participants and 7.3 percent for those who completed the program.

In addition, 89 percent of senior participants completed at least nine core lessons, compared with only 74 percent of all adult participants. While low participation by seniors in online activities is often attributed to technology aversion, research suggests the real cause may be poor program design.

"This study validates what our team has known for a while: that American seniors can—and will—reduce their risk of chronic disease by engaging with a properly designed digital health intervention," Omada co-founder and CEO Sean Duffy said in a statement.

Focus on ease of use, access to support

Each participant in the Omada program receives a welcome package that includes a wireless scale with an embedded cellular chip linked to the patient's profile. The scale requires no setup beyond inserting the included batteries. Once patients step on the scale, it instantly transmits their data, providing a baseline weight and a benchmark for progress in the program.

On the first day of group activities, patients log in to the website and meet their personal health coach via live streaming or a recorded video. The coach's job is to monitor their progress and give feedback in real time. Patients can reach the coach at any time by private messaging, a group discussion board, text message, phone or video chat.

The program features a food-and-activity tracker, where participants enter what they are eating, drinking and doing each day. Graphics indicate each participant's progress toward the goal of at least 5- to 7-percent weight loss. As participants progress in the program, they continue to get individual attention from health coaches, but they also join broader peer-support groups and explore an expanded curriculum focused on overcoming real-life obstacles to staying healthy long term.

Substantial projected savings

According to the study, estimated savings, derived through a simulation model, were \$1,770 per participant over three years, with additional savings projected over the following decade.

"For seniors with prediabetes, the projected per capita saving over 10 years from achieving the weight-reduction results of the digital IBC intervention range from \$12,010 to \$16,390, depending [on] whether they completed the program and the degree to which they sustained their weight loss," the authors added.

Among the study's limitations, the authors noted that although the seniors who participated in the Omada program may represent those who voluntarily took part in a digital intervention, they may not necessarily reflect the characteristics of general Medicare beneficiaries.

The research was published in the October issue of *PLOS One*, an open-access, peer-reviewed journal that brings in revenue from authors of accepted manuscripts instead of charging subscription or per-article purchase fees.



Omada recently partnered with the AMA and Intermountain Healthcare to integrate its program into the Salt Lake City-based health system. The partnership expands on the AMA's efforts to prevent type 2 diabetes by giving physicians new tools and resources to better manage at-risk patients. Its goal is to create a roadmap for health care organizations across the country to integrate proven online prevention programs into physician referrals and clinical workflows.