



MEMORANDUM

Livongo partners with Glytec to offer basal-bolus insulin dosing titration to members; launch this summer with first shared client - April 24, 2017

Livongo just [announced](#) a partnership with Glytec to offer basal-bolus insulin dosing titration software (Glytec's eGlycemic Management System) to Livongo members. The two companies expect to take their first shared client live this summer - great to see this moving quickly. We've confirmed that the product will be co-commercialized as a provider-facing decision support solution, leveraging blood glucose data uploaded automatically through Livongo's cellular-enabled meter. No pricing details have been shared. We're very glad to see this partnership, since we've long been impressed with Glytec's outcomes - e.g., Dr. Bruce Bode's enthusiastic [presentation at ATTD 2017](#). Use of Glytec's software in the outpatient setting drove a sustained 2.6% drop in A1c over a six-month period (skeptics point out the baseline was high at 10.2% - for our money, we'll take a 2.6% drop at any baseline!), and patients were titrated to goal in just 11 days. Glytec's algorithm is FDA-cleared, so risk is low for both, with big potential upside for patients and HCPs. It's great to see Livongo pushing hard on insulin dose titration, which will enhance the efficacy of its BGM + coaching service. This news quickly follows Livongo's insulin dose titration partnership with Voluntis, announced [in February](#) (a US launch of the Insulia app is expected this year). We've been saying for a while that this area is one of the lowest hanging fruits in diabetes technology (not that insulin titration is easy, given the narrow therapeutic window for most), and we're elated to see a full commercial pipeline developing around these products - including all three insulin players and a slew of technology companies (Voluntis, Glooko, Glytec, TypeZero, etc.). We are very hopeful that these systems can drive meaningful glycemic improvements at a low expense, and it will be interesting to see how BGM vs. CGM as an input changes the efficacy. We also wonder how CGM + insulin dose titration software will stack up to a hybrid closed loop - how will payers segment and decide what to offer patients?

-- by Adam Brown and Kelly Close