

**THE FIRST  
AND ONLY  
AUTOMATED  
INSULIN  
DELIVERY  
SYSTEM  
CLEARED  
IN THE U.S.  
FOR ADULTS  
WITH TYPE 2  
DIABETES**



# 2.5 MILLION PEOPLE

WITH TYPE 2 DIABETES ARE ON BASAL-BOLUS THERAPY<sup>1</sup>

## AMONG PEOPLE WITH TYPE 2 DIABETES ON MEALTIME INSULIN

8.6%

IS THE MEAN A1C<sup>2</sup>

59%

HAVE AN A1C >8.0%<sup>3</sup>

ONLY

25.2%

ACHIEVE AN A1C <7.0%<sup>2</sup>

## LESS THAN 5%

OF THE 2.5 MILLION PEOPLE WITH T2D ON BASAL-BOLUS THERAPY **USE AN INSULIN PUMP**<sup>1</sup>



# DO YOU HAVE PATIENTS WHO:



Struggle to calculate mealtime doses?



Currently treat their type 2 diabetes with multiple daily injections, a GLP-1, or a continuous glucose monitor (CGM)?



Have an elevated A1C that is not improving?



Miss injections altogether?



Have difficulty counting carbs?



Have a fear of hypoglycemia?

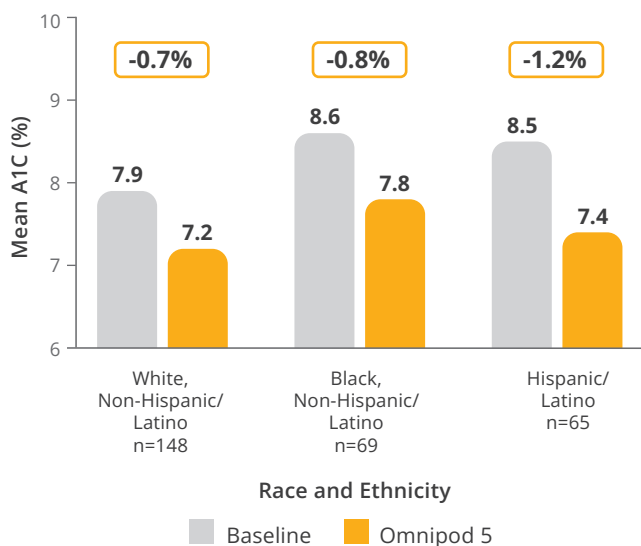


# OMNIPOD® 5 SHOWED IMPROVED RESULTS FOR TYPE 2 DIABETES

The Omnipod 5 SECURE-T2D clinical study is the **longest, largest, and most racially diverse clinical study of automated insulin delivery (AID) in T2D** to date.<sup>4</sup>

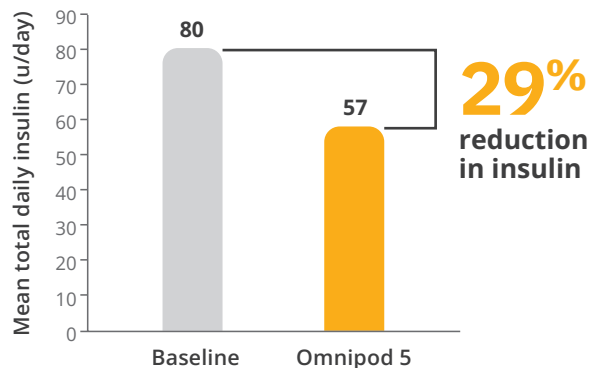
**NO MATTER WHO THEY ARE, HOW MUCH INSULIN THEY USE, AND WHETHER OR NOT THEY COUNT CARBS OR TAKE A GLP-1**

## RACE AND ETHNICITY<sup>5</sup>



Interaction P-value=0.004

## INSULIN USE<sup>6</sup>



**PARTICIPANTS ACHIEVED:**



**Lowered A1C by 2.1%** in those with a baseline A1C  $\geq 9\%$  (-0.8% in full study population)<sup>5</sup>

46%

OF PARTICIPANTS WERE BLACK, HISPANIC, OR LATINO<sup>5</sup>

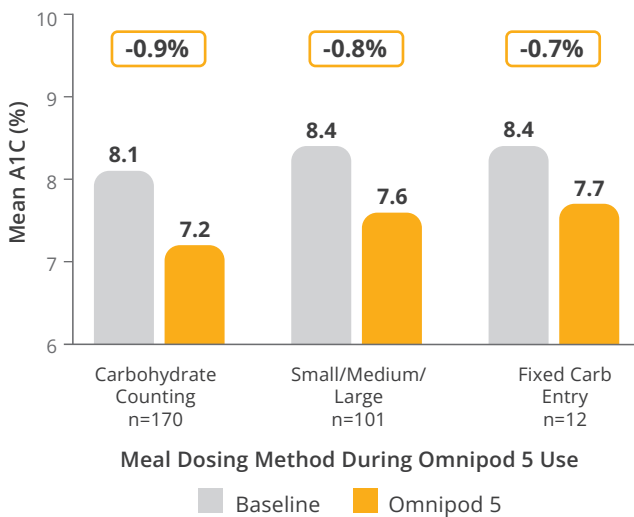
55%

OF PARTICIPANTS WERE USING A GLP-1<sup>5</sup>

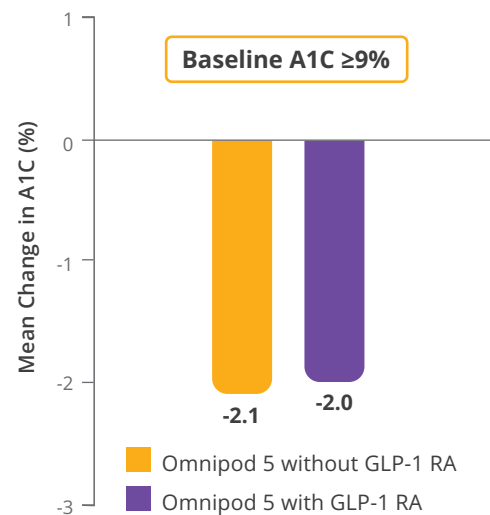
84%

OF PARTICIPANTS WERE NOT CARB-COUNTING BEFORE ENROLLMENT<sup>5</sup>

### MEAL DOSING METHOD<sup>7</sup>



### GLP-1 USE<sup>7</sup>



~5 hrs

More time in range by nearly 5 hours a day<sup>5</sup>  
% time in range (70-180 mg/dL)



No increase in time in hypoglycemia<sup>5</sup>  
% time <70 mg/dL

One case of severe hypoglycemia was reported by an adult with type 2 diabetes during Omnipod 5 System use. The case was not related to Omnipod 5 System malfunction.<sup>5</sup>

PARTICIPANTS IN THE OMNIPOD® 5  
SECURE-T2D STUDY REPORTED  
**HIGH LEVELS OF  
SATISFACTION**



**SIMPLE BOLUSING**

**91%** said it was easy to use the SmartBolus Calculator<sup>8</sup>



**TRUSTED**

**90%** would recommend Omnipod 5 to a friend or family member<sup>8</sup>



**DISCREET, TUBELESS,  
AND WATERPROOF\***

**72%** said they barely noticed wearing the system<sup>8</sup>



**CONVINCING**

**78%** said they would like to continue to use Omnipod 5 after the study<sup>8</sup>



**LOWER PATIENT-  
REPORTED DIABETES  
DISTRESS**

Patients reported clinically **meaningful reduction** in diabetes distress<sup>5</sup>



\*The Pod has an IP28 rating for up to 25 feet for 60 minutes. The Omnipod 5 Controller is not waterproof.

# THE POWER OF OMNIPOD 5

**SmartAdjust™ technology** is always adjusting to help protect against highs and lows<sup>5</sup>

**Flexibility** in sensor and smartphone control



**Tubeless and waterproof\*** so your patients don't need to disconnect from daily activities<sup>†</sup>

Pod shown without the necessary adhesive.

<sup>†</sup>Device components including the Pod, Sensor, and Transmitter must be removed before Magnetic Resonance Imaging (MRI), Computed Tomography (CT) scan, or diathermy treatment. In addition, the Controller and smartphone should be placed outside of the procedure room. Exposure to MRI, CT, or diathermy treatment can damage the components.

**#1 PRESCRIBED  
AID SYSTEM IN  
THE U.S.<sup>9</sup>**

# SIMPLE TO ACCESS

Give your patients a simple way to try, start, and stay on Omnipod® 5.



## Covered under Medicare Part D

Omnipod 5 is the only AID system covered under Medicare Part D without a C-peptide test



## Simple pharmacy access

Patients can get Pods when they pick up their insulin



The majority of Omnipod 5 users with type 2 diabetes pay less than \$50 per month<sup>10</sup>



TALK WITH YOUR NEXT MDI PATIENT ABOUT OMNIPOD 5



References: 1. Data on file. 2024. 2. Hankosky ER, et al. *Diabetes Ther.* 14, 967-975 (2023). <https://doi.org/10.1007/s13300-023-01399-0> 3. Brixner D, et al. *Clin Ther.* 2019;41(2):303-1347 (Supplement1): S11-S19. <https://doi.org/10.2337/dc24-S001> 4. Insulet data on file. August 2024. Based on presented clinical trials of the current AID landscape in T2D. 5. Pasquel FJ, et al. SECURE-T2D clinical study. Presented at: ADA; June 21-24, 2024; Orlando, FL. Subgroup analysis of 68 participants with baseline A1C  $\geq$ 9% Mean HbA1c: standard therapy vs. 13-week Omnipod 5: 10.1% vs. 8.1%; (95% CI: -2.3%, -1.9%). Mean time in range (70-180 mg/dL): standard therapy vs. 13-week Omnipod 5: 45% vs. 66%,  $P < 0.001$ . Mean time  $<$ 70 mg/dL as measured by CGM: standard therapy = 0.2%, 3-mo Omnipod 5 = 0.2%. Mean T2-DDAS total intensity score: standard therapy = 2.5, 3-mo Omnipod 5 = 2.2,  $P < 0.001$ . Mean Proportion with T2-DDAS  $\geq$  2.0, no. (%): standard therapy = 66%; 3-mo Omnipod 5 = 55%,  $P < 0.001$ . 6. Insulet Data on File. SECURE-T2D Clinical Study Report. 2024. 7. Pasquel FJ, et al. Omnipod 5 Product Theater. Presented at: ADA; June 21-24, 2024; Orlando, FL. Post-hoc analysis limits conclusions. 8. Insulet Data on File. SECURE-T2D Clinical Study Report. 2024. 9. USA 2023, Data on file. 10. Source: IQVIA OPCL. Majority is defined over 70%. Based on paid claims for Omnipod 5 G6 Pods with a type 2 diabetes diagnosis code. Includes commercial and Medicare claims. January 2023 through December 2023.



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The Omnipod 5 Automated Insulin Delivery System is indicated for use by individuals with Type 1 diabetes mellitus in persons 2 years of age and older and type 2 diabetes mellitus in persons 18 years of age and older. The Omnipod 5 System is intended for single patient, home use and requires a prescription. The Omnipod 5 System is compatible with the following U-100 insulins: NovoLog®, Humalog®, and Admelog®. WARNING: SmartAdjust™ technology should NOT be used by anyone under the age of 2 years old. SmartAdjust technology should also NOT be used in people who require less than 5 units of insulin per day, as the safety of the technology has not been evaluated in this population.

Refer to the Omnipod® 5 Automated Insulin Delivery System User Guide and [www.omnipod.com/safety](https://www.omnipod.com/safety) for complete safety information including indications, contraindications, warnings, cautions, and instructions.

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