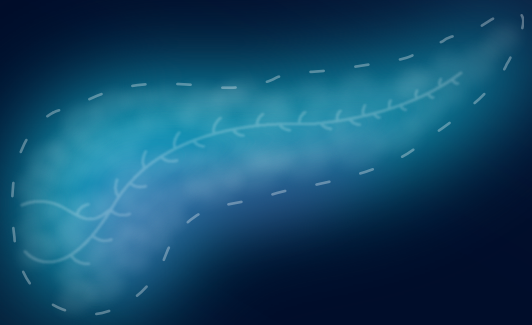
Inreda®

PANORAMA 1

Glucose control with the Inreda AP® after total pancreatectomy

Key findings

1. Time in range increased significantly with 24%
2. HbA1c decreased with 8 mmol/mol
3. Time below range decreased from 1.2 to 0.9%



Overview

This study was a randomized controlled crossover trial conducted over a three-month period in a home setting. Data of 20 adults (18–75 years) following total pancreatectomy were analyzed. Inreda AP treatment was compared with current diabetes care (continuous subcutaneous insulin infusion (CSII) or multiple daily injections (MDI)) in a crossover design.

Results

+24% TIR

Time in range increased significantly from 57 to 81%

-8 mmol/mol HbA1c

HbA1c decreased from 64 to 56 mmol/mol

-0.3% TBR

Time below range decreased from 1.2 to 0.9%

Conclusions

After three months of treatment with the Inreda AP®, time in range and HbA1c significantly improved compared with current diabetes care. These findings support the use of the Inreda AP® in this population.

"Leseman, C. A., et al. (2026). Glucose control during 3-month treatment with bihormonal artificial pancreas versus current diabetes care in patients after total pancreatectomy: Study protocol for the PANORAMA randomized crossover trial. BJS Open, 10(1), zraf151. https://doi.org/10.1093/bjsopen/zraf151

Leseman, C.A., et al. (2026). 1257-OR: Glucose control during three-month treatment with a bihormonal artificial pancreas vs. current diabetes care in patients following total pancreatectomy (PANORAMA): A randomised crossover trial. Diabetes, 75(Suppl. 1), 1257-OR. https://doi.org/10.2337/db26-1257-OR". (Abstract).

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