

and zero-inflated Beta regression further suggest that frail old patients with higher frailty scores may be associated with larger percent time with CGM below range <70 and CGM <54 mg/dL. **Conclusion:** Our results indicate that older adults with T2D with higher frailty score experience more time in hypoglycemia during their hospital stay despite having comparable mean daily blood glucose, time in range and glycemic variability compared to non-frail or pre-frail older adults. A larger prospective study is needed to confirm these findings and determine the impact of frailty on clinical outcome. Providers should be vigilant when using insulin or insulin secretagogues in hospitalized older adults with diabetes and frailty.

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## Diabetes & Glucose Metabolism

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### *Evaluation Of Glycemic Control By Continuous Glucose Monitoring Among Hospitalized Older Adults With Type-2 Diabetes And Frailty*

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Recent observational and meta-analyses have reported a frailty prevalence between 10% and 25% in people with diabetes, in particular in those older than 60 years of age. The impact of frailty on hospital glycemic control and glycemic variability (GV) by continuous glucose monitoring (CGM) in insulin-treated older adults with type 2 diabetes (T2D) is not known. Accordingly, we reviewed data from 3 in-patient randomized clinical trials using CGM in insulin-treated patients with T2D. The validated laboratory-based frailty index (FI-LAB) scale was used for frailty assessment, and participants were categorized into three groups [non-frail: (0-<0.1), pre-frail ( $\geq 0.1$ -<0.21), and frail ( $\geq 0.21$ )] in 84 older adults. | There were no differences on admission clinical characteristics between the non-frail/pre-frail older adults and the frail older adults except for Creatinine (BMI:  $32.4 \pm 9$  vs.  $36.83 \pm 13$ ,  $p=0.21$ ; HbA1c%:  $9.3 \pm 2$  vs.  $8.72 \pm 2$ ,  $p=0.18$ ; Admission BG:  $227 \pm 114$  vs.  $194.07 \pm 75$  mg/dl,  $p=0.26$ ; Cr:  $1.16 \pm 1$  vs.  $1.65 \pm 1.0$ ). There were no differences in GV by coefficient of variation (CV), amplitude of glucose excursion (MAGE), and standard deviation (SD) between the two groups. The correlation between FI-LAB score and percent time with CGM <70 was 0.204 ( $p=0.064$ ) and the correlation between FI-LAB score and percent time with percent time with CGM<54 was 0.217 ( $p=0.049$ ). Results from standard linear regression