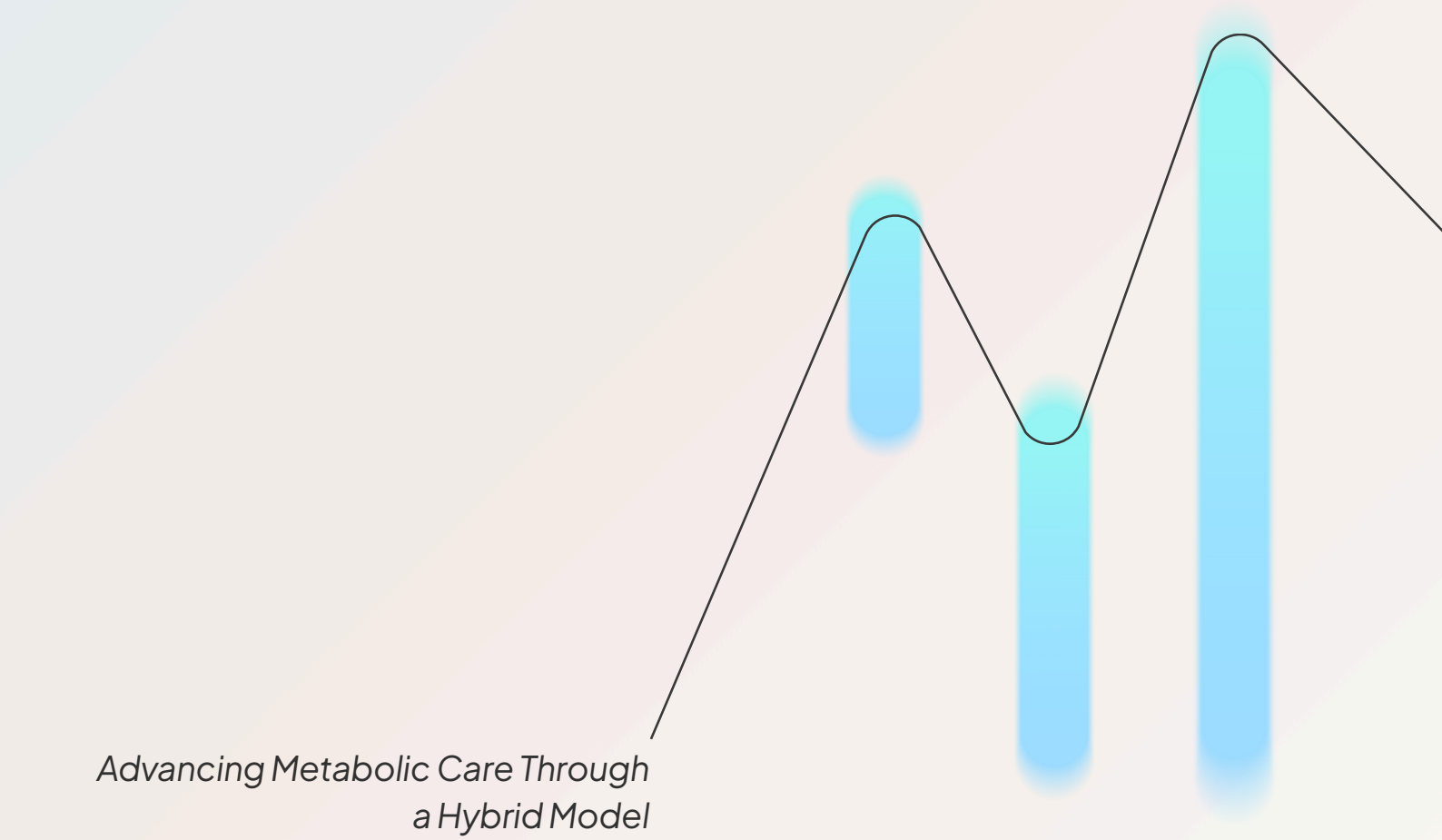
metabolic

2025 Outcome Report

Diabetes, Pre-diabetes, obesity



Advancing Metabolic Care Through a Hybrid Model

2025 KEY OUTCOMES AT A GLANCE

GLYCEMIC OUTCOMES

6.18%
HbA1c at 12 months

≥5% and ≥10%
HbA1c reductions
observed consistently across follow-ups

PREDIABETES REVERSAL

63.6%
Achieved HbA1c <5.7% by 6 months

WEIGHT LOSS OUTCOMES

at 12 months
60.9%
Achieved ≥5% weight loss

52.2%
Achieved ≥10% weight loss.

DIGITAL BEHAVIORAL BIOMARKERS

53.8%
Achieved recommended steps target

71.91 avg Sleep Score
Reflecting adequate sleep quality

PATIENT-REPORTED OUTCOMES & SCREENING

~ 64% **wellbeing scores**
WHO-5 wellbeing scores across all patients

98.8% **low risk for sleep**
of patients with obesity were classified as low risk for sleep apnea at 6 months of treatment

53% **diabetes-related distress identified**
in patients with diabetes and were subsequently referred for appropriate clinical support and management.

The metabolic Model

Our hybrid care model integrates both physical and virtual, data-driven components. The physical clinic provides in-person interactions, including direct clinician engagement, unique diagnostic tests (not usually conducted in traditional care) and comprehensive blood tests that are conducted on-site. Between visits, patients are supported through a "virtual clinic," where the an expended clinical team continues care remotely. This approach enables real-time metabolic health management, facilitates behavioral modification, enhances patient engagement, optimizes risk stratification due to availability of unique data sets, and allows for more targeted, data-driven interventions.

Overview of the Journey

Study Population

Baseline characteristics of the 2025 cohort

Participants included patients attending metabolic (GluCare.Health) between January and December 2025, with baseline measurements obtained at the first clinical visit during the study period. Only those with diabetes, prediabetes and obesity, and with complete data sets, were included visiting a single site.

TOTAL PARTICIPANTS	MEAN AGE	MALE	FEMALE
2,310	41.4 YEARS ±11.8 SD	51.9% 1200 Participants	48.1% 1110 Participants

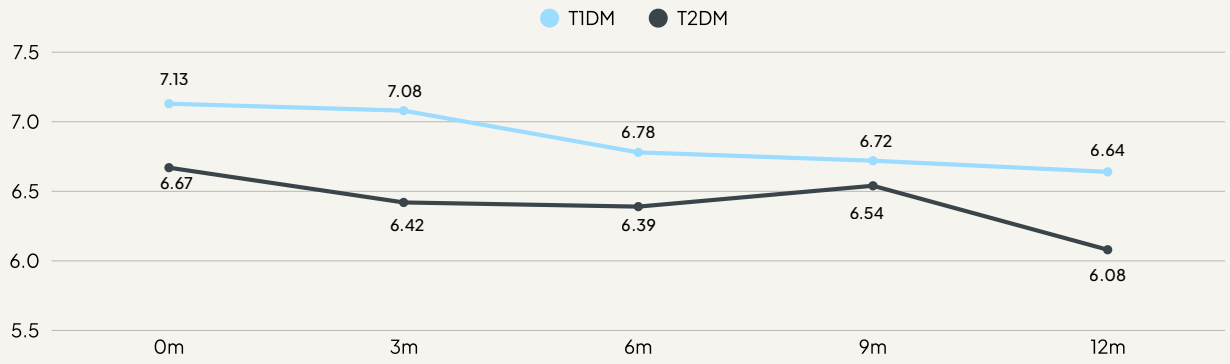
Diabetes (26.9%)	*Prediabetes (22.8%)*	*Weight Loss (50.3%)*

Diabetes

Glycemic and metabolic outcomes analysis across patients with T1DM and T2DM

Longitudinal HbA1c Trends

Across all available participants with T1DM and T2DM , mean HbA1c showed a sustained downward trend over one year.



Clear Improvements in Metabolic Markers

	Total Cholesterol	HDL	Triglycerides	eGFR	ALT	GGT	Weight
Type 2 Diabetes	−11.19% (−18.04 mg/dL)	+2.26% (+1.09 mg/dL)	−18.74% (−23.4 mg/dL)	+9.65% (+8.90 mL/min)	−7.17% (−1.8 U/L)	−25.00% (−7.0 U/L)	−1.52% (−1.25 kg)
Type 1 Diabetes	−7.86% −13.79 mg/dL	−1.04% −0.64 mg/dL	−9.84% −6.9 mg/dL	+9.09% +9.04 mL/min	−0.59% −0.1 U/L	−10.02% −1.5 U/L	+5.22% +3.50 kg

Digital Behavioural Biomarkers

Steps
31.9%
Achieved ≥7,000 steps/day
Average of 6,069/day

Sleep Quality
70.6
Average sleep score
Average of 6.15 hours/night

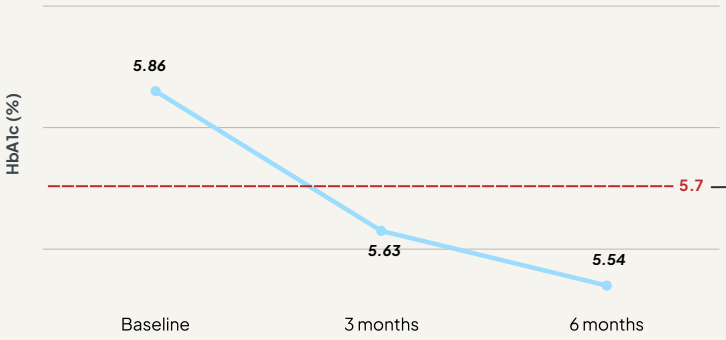
Stress
1.58 hours/day
Daily stress duration

Prediabetes

Glycemic and metabolic outcomes analysis across patients with prediabetes

Longitudinal HbA1c Trends

Across all available participants with prediabetes, mean HbA1c showed a sustained downward trend over 6 months.



63.6%

Prediabetes Reversal Rate

at 6 months of treatment

Prediabetes reversal was accompanied by multi-system metabolic improvement

Triglycerides	LDL	Total Cholesterol	ALP	AST	BMI
-17.5% (-18.85 mg/dL)	-7.6% (-10.12 mg/dL)	-7.3% (-13.56 mg/dL)	-2.19% (-1.50 U/L)	-7.00% (-1.45 U/L)	-3.35% (-1.54 kg/m²)

Prediabetes reversal must not look like a lab-only fluctuation

Digital Behavioural Biomarkers

Steps — **53.8%** Achieved ≥7,000 steps/day. Average of 6,892/day

Sleep Quality — **73.2** Average sleep score. Average of 6.31 hours/night

Stress — **1.83** hours/day Daily stress duration

CGM Improvements

Across patiens with Diabetes and Prediabtes

CGM Metric	Target	Diabetes Achieved	Prediabetes Achieved
Time in Range	≥70%	87.90%	100%
Time Above Range	<25%	92.30%	100%
Time Below Range	<4%	91.20%	84.60%

Weight Loss Outcomes

The structured program resulted in sustained weight reduction, with significant improvements observed across follow-up visits.

Mean weight dropped

-11.37 kg

Within 12 months

Baseline: 85.26 ± 18.98 kg
12 Months: 73.89 ± 13.24 kg

Mean BMI dropped

-3.60 kg/m²

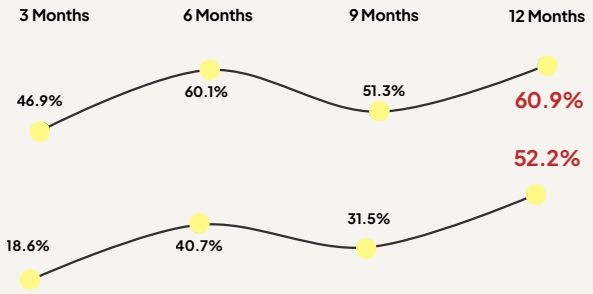
Within 12 months

Baseline: 29.63 ± 5.30 kg/m²
12 Months: 26.03 ± 3.20 kg/m²

Weight Loss Target Achievement

Target 1 –
≥5% Weight Loss from Baseline

Target 2–
≥10% Weight Loss from Baseline



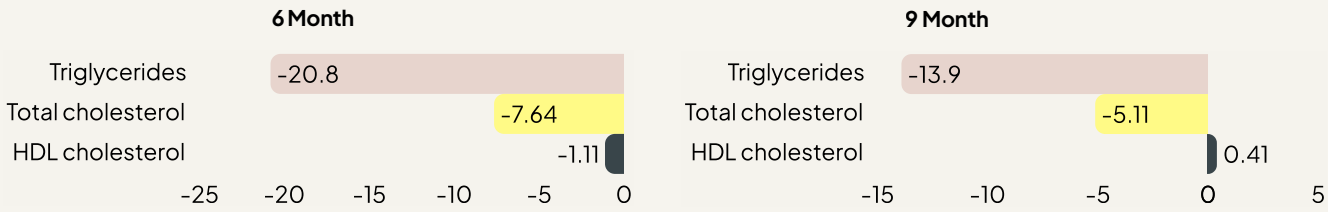
The proportion of participants achieving clinically significant weight loss rose steadily across visits.

~3x

Weight Loss Improvement

≥10% Target : 3M → 12M Growth - From 18.6% at 3 months to 52.2% at 12 months — demonstrating that long-term engagement with the program drives compounding clinical benefit

Lipid Profile Improvement



Patient Reported Outcomes

Patient-reported outcomes demonstrated improvements across multiple EQ-5D-5L domains, with a higher proportion of participants reporting no at 6 months compared with baseline.

Pain / Discomfort	Anxiety / Depression	Sleep Apnea Risk	Mobility Limitations
-28.3%	***-23.9%***	***-52.8%***	***-45.5%***
Participants reporting symptoms	Participants reporting anxiety symptoms	Participants classified as high risk	Participants reporting mobility problems

Conclusions

Program Impact

2,310 **Patients Managed**
Across diabetes, prediabetes, and obesity programs.

52.2% **Achieved ≥10% Weight Loss**
at 12 months

63.6% **Prediabetes Reversal Rate**
as early as 6 months of treatment

87.9% **Achieved CGM Target (TIR ≥70%)**
as early as 3 months

Patient Engagement Through Digital Monitoring

Physical Activity Engagement
53.8%
Achieved ≥7,000 steps/day

Sleep Quality Monitoring
71.9
Average sleep score

Continuous Glucose Monitoring
>87%
of patients with diabetes achieved TIR ≥70%

Patient-Reported Improvements

↓**45%** Mobility limitations
↓**28%** Pain & discomfort
↓**24%** Anxiety symptoms
↓**53%** High sleep apnea risk

The hybrid care model enabled meaningful improvements across metabolic health, patient engagement, and quality of life, demonstrating how integrated clinical care and digital monitoring can drive sustained cardiometabolic outcomes.

Continuous Research at glucare

At glucare, we are committed to advancing diabetes care through ongoing research and innovation. Our team continuously explores new methodologies, technologies, and treatment strategies to improve patient outcomes. Our research aims to refine our hybrid care model and contribute valuable insights to the scientific community.

WE ACHIEVE BETTER RESULTS ACROSS ALL METABOLIC-RELATED OUTCOMES

SEE ALL THE RESULTS

+42
Publications

Report prepared by Hala Zakaria
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For research collaboration opportunities, please contact hala@glucare.health

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