

## 2026 Davee Foundation Lecture and Resident Research Day

### Abstract

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**Title: Impact of Interval Insulin Titration on Glycemic Control in Patients with Uncontrolled Diabetes**

**Background:** Clinical inertia regarding insulin titration remains a significant barrier to achieving glycemic targets in patients with uncontrolled diabetes. Delayed adjustments to insulin regimens often lead to prolonged periods of hyperglycemia and increased risk of complications. Frequent monitoring and proactive dose adjustments are essential, yet traditional clinic-based models alone may lack the agility required for optimal titration.

**Objective:** To evaluate the effectiveness of an intensive, 3-to-4-month hybrid monitoring program—combining telehealth consultations and in-clinic visits—designed to optimize insulin titration and reduce Hemoglobin A1C levels in patients with uncontrolled diabetes.

**Methods:** This study is an observational study evaluating the impact of frequent insulin titration managed through alternating telehealth/ phone check-ins and scheduled in-clinic visits. The primary outcome measure is the subjective improvement in glycemic control among patients with secondary outcomes including change in A1C from baseline to the end of the 3-to-4-month.

**Expected Results:** It is hypothesized that patients will feel more supported through this hybrid model to titrate insulin to goal and achieve reduction in A1C levels. Furthermore, we anticipate the structured telehealth check-ins will facilitate safer insulin titration with no significant increase in severe hyperglycemic events compared to standard care.

**Conclusion:** Utilizing a hybrid telehealth and in-clinic approach for insulin titration has the potential to overcome clinical inertia and significantly improve glycemic control in patients with uncontrolled diabetes. If successful, this model could be implemented as a scalable, standard-of-care protocol to optimize diabetes management and reduce long-term complications.