

Anything is
everything
Exercise Intelligence



EXI retrospective data analysis for
users with **Type 2 Diabetes** + best
practice implementation guide

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Introduction

Type 2 diabetes is the most expensive long-term condition, with increasing numbers of diagnoses each year. Type 2 Diabetes is one of the 23 long term conditions supported by the EXI platform accounting for 20% of total users.

With a sample size of 3,802, 50% linked to an organisation, and 87% having at least one long term condition, our key findings show significant improvements, including a 42% increase in activity minutes, average weight loss of 9.5kg, 4.5cm reduction in waist circumference (4%), 5.6% reduction in systolic blood pressure, and 4.1% reduction in diastolic blood pressure.

EXI supports a number of diabetes management programmes including NHS frameworks for diabetes, which includes the National Diabetes Prevention Programme and Low-Calorie Diet Programme (Diabetes Remission) by specifically focusing on delivering the physical activity component crucial for successful diabetes management.

These programmes are delivered through various methods; face-to-face in the community, digital/remote and hybrid of the previous two models.

EXI offer three flexible integration options for partners based on their current technological capabilities and preferences. Whether they have existing technology or not, they can choose the most suitable integration approach to effectively leverage the platform:

1. EXI Platform: App and Data Portal
2. API Integration + EXI Platform
3. SDK Integration + EXI Platform
(coming in June 2023)

The following detail best practice for implementing EXI into structured diabetes programmes:

1. Clinical Pathway Integration:

Efficiently integrate EXI into established diabetes clinical pathways and diabetes management services.

2. Provide a scalable automated solution:

Streamline personalised exercise prescription at scale by leveraging EXI's automated capabilities, enabling healthcare professionals to prescribe exercise for diverse patient cohorts with complex needs.



Total Sample:

3,802

87%

At least one additional health condition

50%

Linked to a structured programme

3. Real time data flow:

Facilitate seamless data flow to the clinical data portal, empowering healthcare professionals by providing comprehensive and up-to-date patient information supporting delivery of more personalised care and informed decision-making.

4. Structured Follow-Up by clinical teams:

Support implementing structured follow-up processes into current pathways to keep patients engaged with their exercise prescriptions and foster self-management of their condition. Establish regular check-ins and remote interactive patient support sessions to provide ongoing guidance, monitor progress, and address any concerns.

5. Peer-to-Peer Support via Health Unlocked:

Leverage the EXI community on platforms like Health Unlocked to facilitate peer-to-peer support among patients. Encouraging interaction, sharing experiences, and providing a supportive community environment can enhance patient engagement, motivation, and overall self-management of their condition.

6. Resource Prioritisation:

Effectively by leveraging EXI's support, allowing healthcare professionals to allocate resources efficiently based on patient needs, focusing attention on those who require more intensive intervention while empowering others to actively manage their health.

When patients access EXI through a structured programme or clinical pathway, they benefit from enhanced support, personalised guidance, and improved outcomes. Here are the key advantages of this approach:

Clinician Empowerment: Clinicians play a vital role in the success of patients accessing EXI through a structured programme, as their guidance and support are key factors in achieving optimal outcomes.

Improved Results: Patients who access EXI through a structured programme or clinical pathway demonstrate better outcomes compared to direct-to-consumer usage.

Enhanced Structure and Support: Structured programmes provide a framework for patient engagement and adherence, offering additional elements such as nutrition guidance and follow-up support.

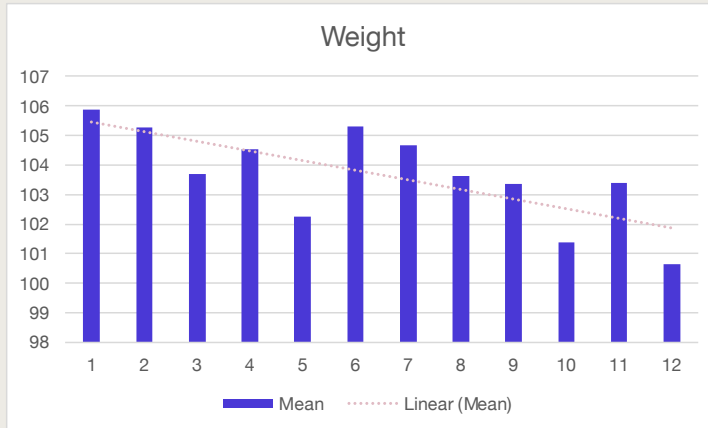
Accountability to Clinical Team: Being aligned to an organisation or structured programme means that patients have accountability to their clinical team. This accountability plays a key role in driving patient engagement and success.

Personalised Guidance: Clinicians have the authority to assign patients to the EXI platform as part of a structured programme or clinical pathway. They can provide personalised guidance, monitor progress, and offer tailored support.

Higher Engagement and Adherence: Patients within a structured programme or clinical pathway experience increased engagement and adherence to their exercise prescriptions, leading to better overall management of their condition.

Descriptive Data

The following charts demonstrate positive trends over users' first 12 weeks of EXI.



Weight

For users who self-reported weight at both week 1 and week 12, there was a significant decrease in weight compared to week one ($t= 2.664, p=0.01, N=65$). The mean decrease was 9.5kgs (8.4%).

Some Key Findings:

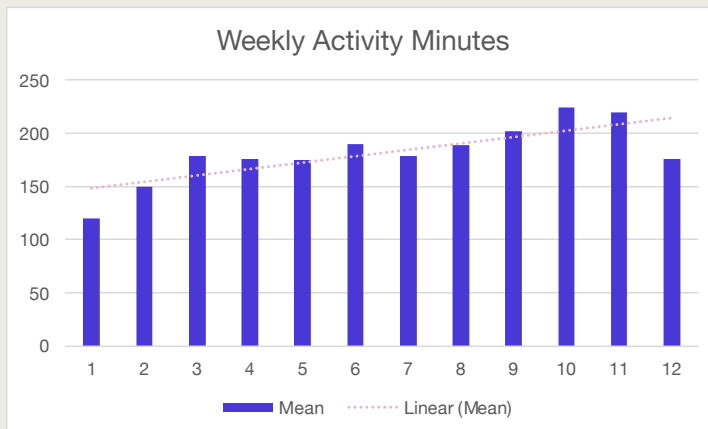
Over 12 weeks from baseline

Weight

9.5
KGS



Significant over 12 weeks



Activity Minutes

For users with wearable devices who recorded data at both week 1 and week 12, weekly activity minutes increased significantly compared to week one ($t= -3.308, p=0.001, N=128$). The mean increase was 57 minutes (42%).

Over 12 weeks from baseline

Activity minutes

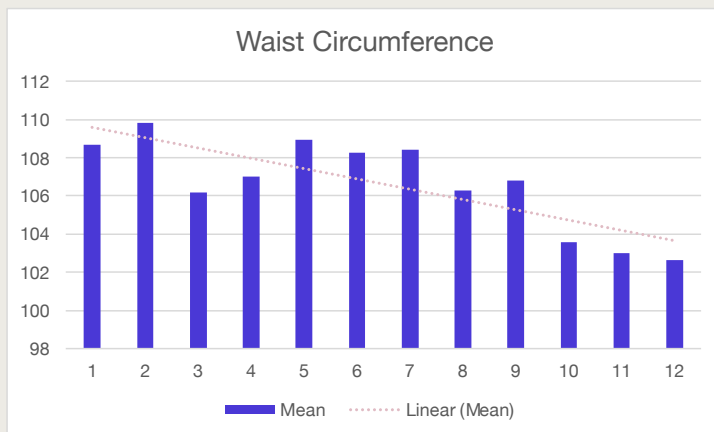
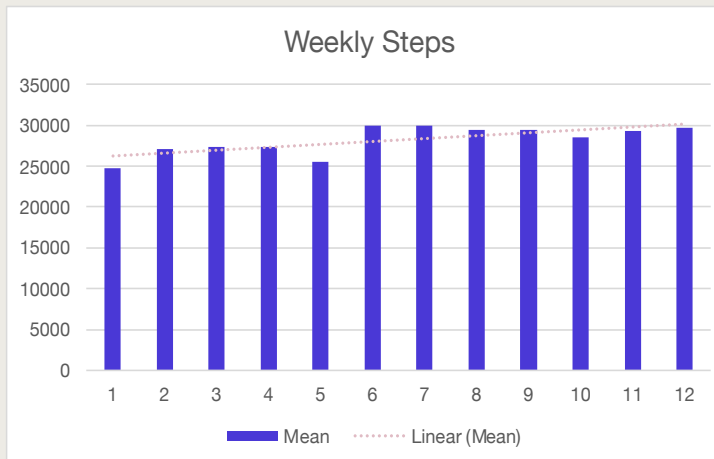
57 mins

+42%



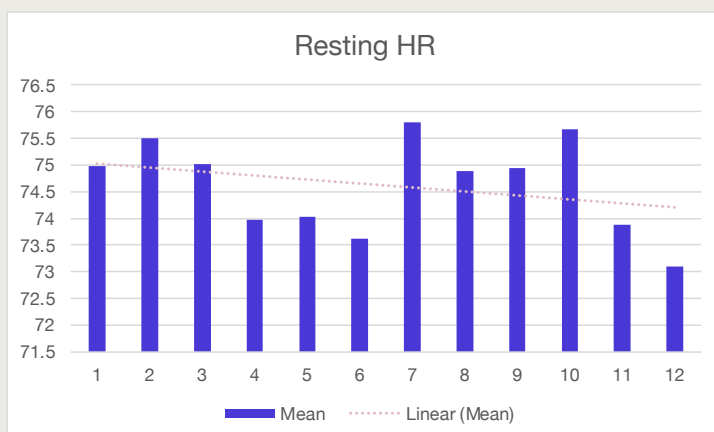
Descriptive Data

The following charts demonstrate positive trends over users' first 12 weeks of EXI (Continued)



Waist Circumference

For users who self-reported waist circumference at both week 1 and week 12, there was a significant decrease in waist circumference compared to week one ($t= 2.025, p<0.05, N=64$). The mean decrease was 4.5cm (4%).

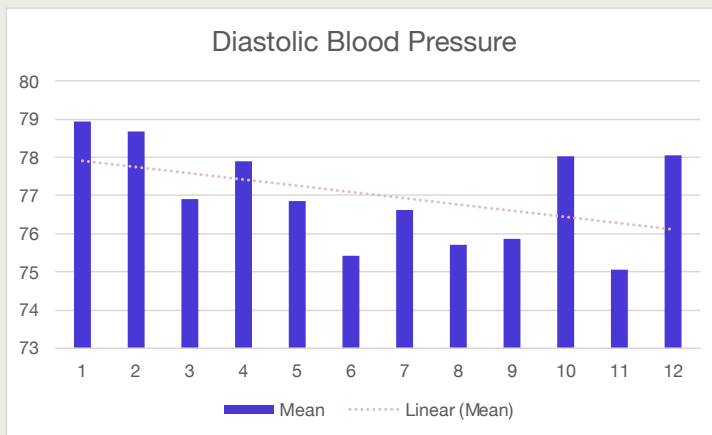
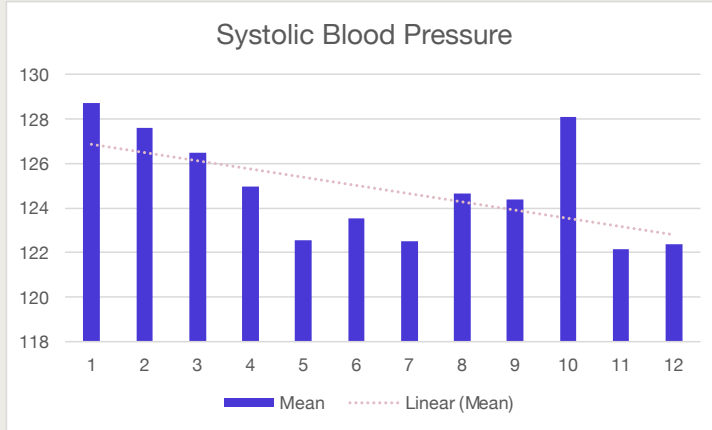


Some Key Findings:

Over 12 weeks from baseline

Waist circumference

4.5 cm
-4%



Some Key Findings:

Over 12 weeks from baseline

Blood pressure

Systolic
5.6
↓ %

Diastolic
4.1
↓ %

Blood pressure

For users who self-reported blood pressure at both week 1 and week 6, there was a significant decrease in both systolic ($t= 2.55, p<0.05, N=54$) and diastolic blood pressure ($t= 2.335, p<0.05, N=52$), compared to week one. The mean decreases were 5.63 (4.3%) and 4.12 (5.2%) respectively.

Conclusion:

By working closely with the clinical teams, we aim to integrate EXI as a seamless component in established Type 2 Diabetes management pathways. We understand the challenges faced by clinical teams and have streamlined the onboarding process to ensure quick adoption and easy incorporation into existing pathways. Through our collective efforts, we can deliver a critical component for Type 2 Diabetes management, driving the best outcomes and empowering both clinicians and patients to achieve success.