



Executive summary of *Cardiology, Renal & Diabetology – Linking Expertise (CRAD-LE)*
 Published on [Working with the NHS \(astrazeneca.co.uk\)](https://www.astrazeneca.co.uk)

Project title	<i>Cardiology, Renal & Diabetology – Linking Expertise (CRAD-LE)</i>
Duration	1 st March 2022 and ending on 28 th February 2023
Project partners	<i>NHS Greater Glasgow and Clyde (NHSGGC) and AstraZeneca</i>
What was the issue to be addressed?	<p>The project aims and objectives were to improve cardiovascular & renal outcomes for patients with Type 2 Diabetes, Type 2 Diabetes & Heart Failure with a Reduced Ejection Fraction & Type 2 Diabetes and Chronic Kidney Disease by establishing a novel service to provide diabetes support to cardiology, nephrology, and primary care, focussing initially on secondary care in GGC, to ensure optimal initiation of guideline recommended treatments for patients with Type 2 Diabetes and Heart Failure with a Reduced Ejection Fraction and/or Chronic Kidney Disease Stage 3.</p> <p>The objectives were to:</p> <ol style="list-style-type: none"> 1) accelerate medicines optimisation with cardio-renal protective agents in secondary care and primary care (2) provide educational support via patients case studies that increase HCP confidence in managing patients' Cardio-Renal risk factors
What were the results?	A prescribing Decision Support Tool (DST) was developed and launched to 105 secondary care prescribers physicians to support cardiorenal risk factor management. 65% of patients referred for specialist diabetology advice were recommended to be initiated on a SGLT2i and none of the patients managed via the CRAD-LE protocol went on to experience problematic hypoglycaemia or euglycaemic (or hyperglycaemic) Diabetic Ketoacidosis.