Embargoed until Saturday, June 6, 2026, at 1:45 p.m. CT

82% of Adults with Type 2 Diabetes Not on Insulin Improve Blood Glucose Levels with Continuous Glucose Monitoring

New Study Highlights Potential of CGM to Help Patients Improve Diabetes Management in Primary Care Settings

NEW ORLEANS, La. (June 6, 2026) – A new study examining the role of continuous glucose monitoring (CGM) in the management of adults with type 2 diabetes who are not on insulin found that CGM substantially reduced hyperglycemia, resulting in a large reduction in A1C compared with a routine care control group. Researchers presented this data today as an oral abstract at the 2026 Scientific Sessions of the American Diabetes Association® (ADA) in New Orleans.

As detailed in the ADA Standards of Care, there is strong, clear evidence that CGM is beneficial for people living with diabetes using insulin (both type 1 diabetes and type 2 diabetes). However, more research is needed to understand the impact of CGMs on type 2 diabetes managed without insulin therapy.

The CONNECT randomized controlled trial was a multicenter study conducted across 22 primary care practices in the U.S. and included 283 adults with type 2 diabetes not on insulin (mean age 60; 32% racial or ethnic minority participants; A1C 7.1% to 14.9%). The trial evaluated the impact of CGM on blood glucose management and A1C levels (a way to understand blood glucose levels over the past two or three months) over 26 weeks. At baseline, mean A1C was 8.8%, with 31% of participants having an A1C ≥9%. In addition, 37% of participants were using an SGLT2 inhibitor, an oral medication that helps remove excess glucose through the urine, while 40% were using an incretin-based medication, such as a GLP-1-based medication. Participants were randomly assigned to either use a CGM device (Dexcom G7) or receive routine care with standard blood glucose meter testing.

The study found that CGM was associated with a substantial reduction in hyperglycemia, resulting in a 0.9% greater A1C reduction after six months in the CGM group compared with the Routine Care control group. Time in the glucose target range of 70 to 180 mg/dL was a remarkable five hours per day greater with CGM than with routine care. Participants in the CGM group expressed greater satisfaction with glucose monitoring and reduced distress related to diabetes compared with the routine care group.

“Since many of the patients with type 2 diabetes who use oral or non-insulin injectable therapies are seen in primary care settings, continuous glucose

monitoring provides an opportunity to close a visible care gap," said Thomas W. Martens, MD, co-author of the study. "As the first major randomized controlled trial evaluating CGM in individuals with type 2 diabetes not using insulin, these findings can help reshape diabetes management and expand treatment options for patients, improve glucose levels and A1C management for clinicians, and ultimately reduce diabetes-related complications."

A 6-month extension phase of the CONNECT randomized trial is currently being conducted, which will provide further data on the sustainability of the beneficial CGM effects after 12 months.

Research Presentation Details:

"CGM for Adults with Type 2 Diabetes Not on Insulin Therapy: The CONNECT Randomized Controlled Trial"

- Thomas W. Martens, MD
- Oral Presentations - Session #1: What's New with CGM Systems?
- Saturday, June 6 from 1:45-2:00 p.m. CT
- Ernest N. Morial Convention Center, La Nouvelle Orleans C (Level 2)

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About American Diabetes Association's 2026 Scientific Sessions

The ADA's 2026 Scientific Sessions, the world's largest scientific meeting focused on diabetes research, prevention, and care, will be held in New Orleans, LA, from June 5-8. Thousands of leading physicians, scientists, and healthcare professionals from around the world are expected to convene both in person and virtually to unveil cutting-edge research, treatment recommendations, and advances toward a cure for diabetes. Attendees will receive exclusive access to thousands of original research presentations and take part in provocative and engaging exchanges with leading diabetes experts. Join the Scientific Sessions conversation on social media using #ADASciSessions.

About American Diabetes Association

The American Diabetes Association (ADA) is the nation's leading voluntary health organization fighting to end diabetes and helping people thrive. This year, the ADA celebrates 85 years of driving discovery and research to prevent, manage, treat, and ultimately cure diabetes—and we're not stopping. There are over 155 million Americans living with diabetes or prediabetes. Through advocacy, program development, and education, we're fighting for them all. To learn more or to get involved, visit us at diabetes.org or call 1-800-DIABETES (800-342-2383). Join us in the fight on Facebook (American Diabetes Association), Spanish Facebook (Asociación Americana de la Diabetes), LinkedIn (American Diabetes Association), and Instagram (@AmDiabetesAssn). To learn more about how we are advocating for everyone affected by diabetes, visit us on X (@AmDiabetesAssn). (@AmDiabetesAssn). To learn more

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