How did the participation in the DMP change your medical treatment?

% Baseline (N=319)
% Follow-Up (N=303)

0 10 20 30 40 50 60 70 80 90 100
Worsening
No change
Improvement

How did your body weight change due to the program?

% Baseline (N=324)
% Follow-Up (N=305)

0 10 20 30 40 50 60 70 80 90 100
Increase
No change
Decrease

How did your GHb values change due to the program?

% Baseline (N=273)
% Follow-Up (N=283)

0 10 20 30 40 50 60 70 80 90 100
Increase
No change
Decrease

How did your blood pressure change due to the program?

% Baseline (N=313)
% Follow-Up (N=301)

0 10 20 30 40 50 60 70 80 90 100
Increase
No change
Decrease

How would you rate the overall benefit of the DMP for you?

% Baseline (N=315)
% Follow-Up (N=301)

0 10 20 30 40 50 60 70 80 90 100
Very low–none
Low
Moderate
High–very high