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| **Symposium or Masterclass Title (max. 10 words):**  *The title should be as brief as possible and clearly indicate the nature of the session. If you wish to include a subtitle, it must be included in this field and included in the 10-word limit.* |
| The changing treatment paradigm for T1D and the patient perspective |

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| **Presenters:**  *Please provide details of all proposed presenters including their name, email address, ADS or ADEA member number (if applicable) and their residential state. Please indicate the key contact person for this session with an asterisk.* |
| Prof John Wentworth – [john.wentworth@mh.org.au](mailto:john.wentworth@mh.org.au), ADS member M00967, Vic  \*Candice Hall – [chall@svi.edu.au](mailto:chall@svi.edu.au), ADEA member 101320, Vic  Kelly McGorm – kelly.mcgorm@adelaide.edu.au ADEA member 114492, SA  Renee Kludas – [renee.kludas@mh.org.au](mailto:renee.kludas@mh.org.au) Non-member, Vic  Aniruddh Haldar – [aniruddh.haldar@mh.org.au](mailto:aniruddh.haldar@mh.org.au), ADEA member 107768, Vic  Karen Pritchard – [karen.pritchard@mh.org.au](mailto:karen.pritchard@mh.org.au), ADEA member 108016, Vic |

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| **Session Chair(s):**  *Please provide details of the nominated session chair(s), including their name and email address.* |
| Tony Huynh (tony.huynh@health.qld.gov.au)  Ashley Ng ([ashley.ng@monash.edu](mailto:ashley.ng@monash.edu)) |

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| **Session description (max. 200 words):**  *Please provide an overview of the session, including key content each presenter intends to cover.* |
| The treatment paradigm for type 1 diabetes (T1D) is changing with insulin no longer the sole management option. The Australasian Type 1 Diabetes Immunotherapy Collaborative (ATIC) provides access to new therapies through clinical trials. A growing number of effective therapies like baricitinib, along with the recent FDA approval of teplizumab in the US to delay the onset of stage 3 T1D, are expected to translate to the clinic over the next 3 to 5 years.  The 2023 introduction of blood-spot screening in Type1Screen enables early detection of T1D in Australians, regardless of geographical location, providing a platform for testing immunotherapies to prevent progression to insulin dependence.    **Screening and monitoring in Type1Screen**   * Just because we can, does it mean we should? Conversations about screening and presymptomatic T1D * International and national monitoring guidelines, next steps following positive screening test * Lived experience: impact of a positive screening test; grief and empowerment   **Delaying T1D progression**   * The changing treatment paradigm; new agents, the trial pipeline and off-label immunotherapy use * Lived experience: Insights of a trial participant   **T1D clinical trials – prevention or intervention**   * Navigating options; harm versus benefit, current trial opportunities, referring patients to trials * Lived experience: A journey through the stages of T1D   **Panel Q&A** |
| **Evidence base (max. 100 words):**  *Where appropriate, please include a brief description and citations of the evidence that supports your session or will be presented and discussed during the session.* |
| Waibel M et al. (2023). Baricitinib and beta-cell function in patients with new-onset type 1 diabetes. New England Journal of Medicine 389:2140-50.  Wentworth JM et al (2025). Islet Autoantibody Screening Throughout Australia Using In-Home Blood Spot Sampling: 2-Year Outcomes of Type1Screen. Diabetes Care dc24-2443  Insel RA et al. (2015) Staging Presymptomatic Type 1 Diabetes: A scientific statement of JDRF, the Endocrine Society, and the American Diabetes Association. *Diabetes Care 38:1964-1874*  ATIC Position statement on the use of baricitinib to treat type 1 diabetes (2024), https://atic.svi.edu.au/resources/ |

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| **Key learning objectives (max. 100 words):**  *Please identify the key knowledge and/or skills that delegates will achieve by the conclusion of the session. Key learning objects can be presented in dot point form.* |
| It is crucial for diabetes health professionals to remain informed of the options available, including clinical trial opportunities to delay the progression of T1D, and how to navigate conversations with patients. Participants in this session will leave with:   * A working knowledge of current trial options for patients with T1D from pre-clinical to recently diagnosed, and established stage 3 T1D * Referring families to ATIC for clinical trials * An understanding of how trial participation can complement clinical care * An understanding of the participant experience in both screening programs and trials, and how health professionals can support the decision-making process |