Scientific Content Strategy Sample

Medical affairs message map and slide copy | diabetes technology

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Sample Type: Scientific content strategy and slide copy for a medical affairs deliverable

Project brief

Develop a concise medical affairs education module for internal field medical teams on the role of glucose pattern data in adults with type 2 diabetes. The module should be scientifically balanced, nonpromotional, and useful for teams discussing evidence generation, patient education, and clinician engagement.

Strategic communication objective

Position glucose pattern data as a supportive clinical conversation tool rather than as a stand-alone solution. The core message should connect CGM-derived insights with comprehensive diabetes care, including lifestyle patterns, medication discussions, cardiovascular risk management, and patient-centered decision-making.

Audience and use case

Audience	Need	Content response
Field medical team	Needs concise, accurate language for scientific exchange	Message map, evidence caveats, and source-grounded talking points
Clinical educator	Needs patient-friendly framing	Plain-language explanation of CGM patterns and appropriate escalation
Medical reviewer	Needs evidence boundaries	Clear separation of published guidance, ongoing research, and inference

Message map

Core message	Support point	Evidence boundary
CGM can reveal glucose patterns not captured by single time-point checks.	Patterns may include meal-related rises, overnight trends, and variability around activity.	Do not claim outcome improvement without source-specific evidence.
Periodic CGM is an active research question in selected non-insulin-treated adults.	A public trial is comparing continuous and periodic CGM wear.	Do not present periodic wear as established equivalent.
Glucose data should be interpreted within comprehensive diabetes management.	Guidelines address glycemic goals alongside cardiovascular, kidney, blood pressure, lipid, and complication screening considerations.	Avoid technology-only framing.

Draft slide copy

Slide 1: Why glucose pattern data matters

- A1C summarizes average glucose over time but does not show daily patterns.
- CGM can help visualize glucose trends during meals, overnight periods, activity, illness, stress, or medication changes.
- For non-insulin-treated type 2 diabetes, the communication focus is pattern recognition, education, and shared decision-making.

Slide 2: Evidence generation question

- Ongoing research is evaluating whether periodic CGM wear can provide useful information compared with continuous wear in selected adults.
- This question reflects real-world considerations: burden, cost, comfort, data volume, and patient engagement.
- Until comparative results are available, claims should be framed as investigational or exploratory when referring to periodic use.

Slide 3: Balanced scientific exchange language

Suggested response: CGM may help some adults with type 2 diabetes and their clinicians identify glucose patterns that support more focused care discussions. However, the role of CGM, the optimal wear schedule, and the expected clinical impact can vary by patient population, treatment regimen, and evidence base. Current communications should avoid one-size-fits-all conclusions.

Slide 4: Review committee watchouts

- Avoid implying personal benefit from study participation.
- Do not overstate periodic CGM equivalence before results are available.
- Avoid treatment-adjustment language that bypasses clinician judgment.
- Use current guideline sources and product-specific labels for safety information.

Deliverable rationale

This sample demonstrates senior-level medical writing skills beyond drafting text: developing a message architecture, identifying evidence limits, anticipating review concerns, and translating source material into modular slide-ready content for cross-functional use.

Selected Public Sources Used for Mock Sample

1. ClinicalTrials.gov. Continuous Glucose Monitoring in Non-Insulin Treated Type 2 Diabetes: Continuous vs. Periodic Use. NCT07336329. Accessed May 29, 2026.

3. American Diabetes Association. Standards of Care in Diabetes - 2026. Accessed May 29, 2026.

4. MedlinePlus. Type 2 Diabetes. Updated January 21, 2026.