Continuous Glucose Monitors:

Use with multiple daily injections (MDI) insulin

Version Number:	3.0
Date Approved:	04.02.2025
Date of Next Review:	04.02.2027
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Approval Group:	Non-Medicines Utilisation Subcommittee of ADTC

Important Note:

The Internet version of this document is the only version that is maintained. Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

Scope

This document provides details of the responsibilities of acute care/ specialist services, primary care teams and patients in the context of Continuous Glucose Monitoring (CGM).

For advice for patients on Hybrid Closed Loop systems please click here

Background

CGM can help to improve glycaemic control in adults with diabetes who use insulin. It helps to improve glycaemic control by providing sufficient, reliable recordings of glucose against which insulin dose and schedules can be adjusted. This document provides information on two CGM Systems, FreeStyle Libre 2® Plus and Dexcom ONE®+.

N.B. All patients using continuous glucose monitoring sensors will require to test capillary blood glucose using finger prick testing on occasion, for example to check the accuracy of their CGM device or as a back-up (e.g. if blood glucose levels are changing quickly or if the device stops working).

Use with multiple daily injections (MDI) insulin

This section of the document provides information for those on multiple daily injections (MDI) of insulin on two CGM Systems, FreeStyle Libre 2® Plus and Dexcom ONE®+.

Eligibility Criteria

For details on NHSGGC eligibility for CGM, please refer to (Appendix 1)

Responsibilities of Specialist Diabetes Teams

- Assess patient's eligibility (Appendix 1) for the use of CGM
- Discuss with people with diabetes the commitment required for trial and on-going supply of CGM
- Advise patients to engage with online education session about CGM
- Provide patient education sessions on CGM and education material, if patient cannot engage with the online sessions
- Provide the person with reader and sensor if needed
- Advise the patient's General Practitioner of the patient's eligibility for CGM and advice on issuing prescriptions for sensors and blood glucose test strips
- Provide advice as required in regard to ongoing suitability of CGM

Responsibilities of Primary Care Teams

- Do not prescribe CGM sensors for any patient unless they have been deemed as meeting the access criteria by the specialist diabetes service, including patients who are currently “self-funding” and correspondence has been received from the service.
- If a patient (with Type 1 diabetes or pancreatic diabetes on insulin) is requesting CGM and they have Type 1 diabetes or pancreatic diabetes on insulin, they should request this from their specialist team. If they are not attending a specialist clinic they should be re-referred as this is their only route to accessing CGM.
- If patients with Type 2 diabetes meet the eligibility criteria (including exceptional circumstances) then referral to a community MDT (cMDT) or via SCI Gateway is appropriate.
- Prescribe ongoing CGM sensors after specialist approval or initiation
- Prescribe blood glucose test strips (and blood ketone strips in appropriate patients), as recommended by the specialist diabetes teams which will still be required, such as when a person is unwell (scanned readings are at the extremes of glycaemia) or to meet the requirements of the Driver and Vehicle Licensing Agency in assessing fitness to drive.

Responsibilities of Patients/Carers

- Attend follow up appointments
- Use testing strips and sensors as recommended
- Request from manufacturer a replacement for damaged/faulty sensors, or if sensors fall off early
- Highlight to usual diabetes care team if they require additional sensors on a regular basis
- Share glucose monitoring data with their usual diabetes care team
- Engage with diabetes care team to optimise issues with glycaemic control

FreeStyle Libre 2® Plus

Glucose levels can be monitored using the FreeStyle LibreLink app (if the patient has a compatible smartphone) or the FreeStyle Libre® 2 Reader. FreeStyle Libre® video tutorials and user manuals can be found here.

FreeStyle Libre 2® Plus should be prescribed for those (eligibility criteria below, Appendix 1) who agree to attend a locally provided education session or complete online certified training modules (part of Freestyle Libre Academy) and satisfy their clinical team that they (or carer) have the required knowledge / skills to self-manage diabetes.

FreeStyle Libre 2 sensors will be phased out in the UK by the end of August 2025, meaning that those who use the sensors will need to switch to FreeStyle Libre 2 Plus sensors.

FreeStyle Libre® 2 Plus Sensor Prescribing Recommendations

- A maximum of 25 sensors should be prescribed per patient per year.
- The FreeStyle Libre® 2 Plus can be worn for up to **15 days,** which differs to the 14-day sensor wear time of the previous FreeStyle Libre® 2.

  Specialists and GPs cannot issue prescriptions to replace defective sensors or those that have fallen off. If sensors are defective or fall off, patients should contact the manufacturer on the same day to obtain a replacement by calling the Abbott Customer Careline on 0800 170 1177 or Online request portal at Sensor Support Form | United Kingdom | FreeStyle Libre | Abbott.

Dexcom ONE®+

Dexcom ONE®+ is an alternative option for eligible individuals (eligibility criteria below, Appendix 1) with diabetes who require continuous glucose monitoring as recommended by their diabetes specialist clinician.

Glucose levels can be monitored using the Dexcom ONE+ app (if the patient has a compatible smartphone) or optional Dexcom ONE Receiver. Short video tutorials on how to set up the Dexcom ONE®+ device and apply the sensor can be found here, as well as in the app.

Dexcom ONE® sensors will be phased out in the UK by the end of May 2025, meaning that those who use the sensors will need to switch to Dexcom ONE®+.

Previous Dexcom ONE® receivers do not work with the new Dexcom ONE®+ sensor. Patients using a receiver should be advised to contact their local hospital Diabetes Team to access a new compatible Dexcom ONE®+ receiver.

Dexcom ONE® Sensor Prescribing Recommendations

- Dexcom ONE®+ sensor can be worn for up to 10 days.
- Dexcom ONE®+ sensor consists of an all-in-one sensor/transmitter. Unlike the previous Dexcom ONE® there is no need to prescribe a separate transmitter. Dexcom ONE®+ sensor consists of an all-in-one sensor/transmitter.
- Specialists and GPs cannot issue prescriptions to replace defective sensors. Any patients who are experiencing issues with their sensor, transmitter or receiver should contact the Dexcom Technical Support Team using the Support Request Form via the Dexcom website (here) or by telephone on 0800 031 5763.

Appendix 1 – Eligibility Criteria

- All patients with Type 1 diabetes
- Patients with Pancreatic diabetes where the treating clinician feels they have evidence of insulin deficiency
- People with diabetes of any aetiology who are using multiple daily injections (MDI) i.e. 3 or more insulin injections a day. Patients on twice a day mixed insulin are not eligible routinely unless they meet additional criteria
- People using insulin who do not fit the above criteria but would benefit from continuous glucose monitoring due to
    - ❖ High risk of hypoglycaemia (reduced awareness, recurrent or severe hypoglycaemia)
    - ❖ Ketosis prone
    - ❖ Difficulty with technical aspects of checking capillary blood glucose levels

If there is a perceived requirement for CGM in patients who are out-with these criteria, this can be considered following peer review. This could be discussed at a cMDT or by referral for advice via SCI Gateway for patients not currently attending secondary care.