

## Self monitoring of blood glucose

- Self monitoring of blood glucose (SMBG) is only useful if patients are counselled on the purpose of testing and know how to interpret and act on the results of the testing, in terms of lifestyle and treatment changes. There is no benefit in SMBG unless the person knows how to interpret and act on the results obtained.
- Who should be testing:
  - people with type 1 diabetes
  - diabetes in pregnancy
  - people with type 2 diabetes on insulin
  - people with type 2 diabetes who drive and are prescribed a sulphonylurea
  - people with type 2 diabetes: having symptoms of hypoglycaemia/ suspected hypoglycaemia, or hypoglycaemia unawareness, or to monitor changes during intercurrent illness.
- Who should not need to test:
  - people with type 2 diabetes controlled by diet and exercise
  - people with type 2 diabetes (not on insulin) who have good control do not routinely need to test, unless control is destabilised by other factors (such as an acute illness). In these patients glycaemic control is best monitored through HbA<sub>1c</sub> testing.
- Microdot<sup>®</sup>+ and Omnitest<sup>®</sup>3 are the first line blood glucose meters and testing strips. Patients should be reviewed and following patient involvement and discussion can be changed to the more cost effective test strips.
- It is recognised that alternative blood glucose testing systems may be required for some patients (specialist recommendation), dependent on their individual needs. The following groups of patients may be less suitable for the first line blood glucose testing strips:
  - Children and adolescent type 1 diabetics-usually up to the age of 19 (although caution in patients in their early 20s for whom blood glucose testing systems are chosen as a motivational tool in order to encourage compliance).
  - Patients using insulin pumps (may have their own meter with pump, or may use FreeStyle<sup>®</sup> InsuLinx system or Accu-Chek<sup>®</sup> Aviva Expert, depending on pump).
  - Type 1 diabetics at risk of diabetic ketoacidosis who need to test blood for ketones (these patients may be prescribed FreeStyle<sup>®</sup> Optium  $\beta$ -Ketone or GlucoMen<sup>®</sup> LX Ketone).
  - Microdot<sup>®</sup>+ meters for all women with gestational diabetes regardless of treatment management. GlucoMen<sup>®</sup> LX PLUS meters for all women with type 1 or 2 diabetes, which allows the women to monitor both blood glucose (GlucoMen LX<sup>®</sup> Sensor test strips) and blood ketones (GlucoMen<sup>®</sup> LX ketone test strips).
  - Some patients who are counting carbohydrates (some clinics may prefer to use FreeStyle<sup>®</sup> InsuLinx or Accu-Chek<sup>®</sup> Aviva Expert).
  - Long distance drivers may request a smaller meter that fits in their shirt pocket. In this group of patients, One Touch<sup>®</sup> or an Accu-Chek<sup>®</sup> Aviva Nano is an option.

### Needles for pre-filled disposable injections and reusable pen injectors:

- Omnican Fine<sup>®</sup> needles (available as 4mm, 6mm, 8mm, 10mm and 12mm) and Microdot Droplet<sup>®</sup> pen needles (available as 4mm, 6mm and 8mm) are cost effective first line pen needles.
- All needles are for single use only. Please ensure that patients are educated about the safe disposal of needles via a sharps bin. Sharps bins (Sharpsafe 1 litre/Sharpsguard 1 litre) can be prescribed on FP10 prescription.

### Lancets:

- Microdot<sup>®</sup> lancets (0.31mm/30 gauge) are cost effective first line lancets. They are compatible with most finger pricking devices. Finger pricking devices are not available on FP10 prescription, but are supplied with the blood glucose meter and Microdot<sup>®</sup> lancets are available from the company free of charge.
- All lancets are for single use only. Please ensure that patients are educated about the safe disposal of lancets via a sharps bin.
- Ensure that the quantity of lancets on prescription are appropriate and in accordance with the frequency of blood glucose testing.