**Prescribed Real Time Continuous Glucose Monitoring (rtCGM)**

**Treatment Pathway- Interim to support prescribing current Kent and Medway ICB position v2**

**About Continuous Glucose Monitoring (CGM) system**

Continuous glucose monitoring automatically tracks blood glucose levels, also called blood sugar, throughout the day and night. You can see your glucose level anytime at a glance. A CGM works through a tiny sensor inserted under your skin, usually on your belly or arm. The sensor measures your interstitial glucose level, which is the glucose found in the fluid between the cells. The sensor tests glucose every few minutes. A transmitter wirelessly sends the information to a monitor.

Real-time continuous glucose monitoring (rtCGM) transmits glucose levels to a mobile phone, with readings automatically updated every few minutes. Intermittently scanned CGM (isCGM) or ‘Flash’ monitoring requires the user of the device to scan the glucose sensor with a mobile phone or a small hand-held reader to identify the glucose level.

**NICE Update 2022**

The National Institute for Health and Care Excellence (NICE) has recommended the use of

real-time continuous glucose monitoring (rtCGM) for adults and children living with type 1

diabetes.

**Switching patients from Flash(isCGM) to rtCGM**

Adult patients who meet the set eligibility criteria will be contacted by either their diabetes specialist in secondary care or their community diabetes team or the primary care team (if they have completed the appropriate training) to switch from isCGM (flash) to rtCGM following their next routine appointment.

For children it is intended that the initiation of these devices takes place in secondary care following review and where a prescribed device is clinically beneficial to the patient.

Currently, those eligible for rtCGM in Kent and Medway include:

* Children with type 1 diabetes
* Children who are already receiving treatment and have moved into adult services
* Adults with type 1 diabetes who are currently using an isCGM device may be able to switch to a rtCGM device. This includes Dexcom One, Glucomen Day or GlucoRx Aidex. Patients should discuss this with a diabetes specialist during a routine appointment.

**Other requirements**

* Previous patient attendance, or due consideration given to future attendance, at a Type 1

diabetes structured education programme (DAFNE or equivalent if available locally) if applicable.

* The specialist team will write to the GP to request a switch from isCGM to rtCGM. These letters will contain the necessary information needed to continue prescribing in primary care such as quantities to prescribe, education and training given to the patient
* Education on rtCGM should be provided by the person initiating the new device.
* A review of blood glucose test strip machine to a formulary choice and quantity

Resources to access training have been listed below. Please note that registration will be

required to access these training resources

* + [Diabetes Specialist nurse forum UK](https://www.diabetesspecialistnurseforumuk.co.uk/insulin-pumps-and-technology)
	+ [Effective Diabetes Education Now (EDEN)](https://www.edendiabetes.com/news-blog/2022/6/9/flash-and-cgm-education-pack-for-primary-care-now-available)
	+ [Association of British Clinical Diabetologists](https://abcd.care/)
	+ Training is also available for those devices that can be prescribed by the manufacturers. [Dexcom ONE](https://www.dexcom.com/en-GB/learn-dexcom-one)

[Glucomen Day](https://glucomenday.com/newplatform/glucomen-day-cgm/glucomen-day-cgm-training-and-guides/)

[GlucoRX Aidex](https://www.glucorx.co.uk/glucorx-aidex-hub/)

**Those patients eligible for rtCGM**

See existing Kent and Medway isCGM documentation “Flash Glucose Monitoring System Treatment Pathway”. All children with type 1 are suitable following review by specialist team in secondary care if a prescribed rtCGM devices is most suitable. Currently those patients with type 2 diabetes (apart from those on the learning disability register) are not suitable- this is being planned for consideration for 23/24 financial year.

**rtCGM Devices Available to be prescribed see Appendix 2 below as well**

NB updated from v1 following Dexcom One Transmitter addition to drug tariff from March 2023. This is a working document that will be updated as policy and evidence changes.

**FAQ’s**

**What devices are available on prescription?**

Freestyle Libre 2, Dexcom One, Glucomen Day and GlucoRx Aidex are available on prescription for some patients living in Kent and Medway. This includes children with type 1 diabetes, children who are already receiving treatment and have moved into adult services, and adults with type 1 diabetes who are currently using isCGM devices and wish to transfer to a rtCGM device. Other rtCGM devices can only be supplied by a hospital team. This document focuses on rtCGM devices.

**What is the duration of prescriptions?**

Patients should be prescribed devices for a duration of 28 days. 30 days is suitable for Dexcom One

Quantity for one month supply of each device is as follows:

|  |  |  |
| --- | --- | --- |
| **Device and sensor** | **Quantity for 28 day or 30 day supply** | **Maximum quantity per year**  |
| Freestyle Libre 2 (isCGM)- 1 sensor lasts 14 days | 2 sensors | 26 sensors  |
| **Dexcom One (rtCGM)- 1 sensor lasts 10 days** | **3 sensors (30 day supply)** | **36 sensors**  |
| **Dexcom One transmitter- 1 transmitter lasts for 3 months – suggest adding to variable repeat so it can be ordered by a patient but not issued every month or consider acute prescriptions** | **1 transmitter every 3 months**  | **4 transmitters** |
| Glucomen Day (rtCGM)- 1 sensor lasts 14 days | 2 sensors | 26 sensors  |
| GlucoRx Aidex (rtCGM)- 1 sensor lasts 14 days | 2 sensors | 26 sensors |

**I have a patient on Freestyle Libre. Can they switch to Dexcom One, Glucomen Day or GlucoRx Aidex?**

The patient will need to meet the existing criteria for Kent and Medway. See above for this and existing documentation for this. Planning and pathways for other adult type 1 and type 2 patients is being developed for 23/24.

**Can patients use a CGM device in connection with an insulin pump?**

CGM can be used in isolation for glucose monitoring or in combination with a compatible pump as a hybrid closed-loop system. Patients will need to meet the eligibility criteria for Kent and Medway. Currently none of the devices mentioned above that can be prescribed are able to connect with an insulin pump.

**Can patients get a Freestyle Libre 3 on the NHS?**

The FreeStyle Libre 3 system is not available on prescription. It is available via the NHS Supply Chain. Insulin Pumps, Continuous Glucose Monitoring, Closed Loop Insulin Delivery Systems and Associated Products framework which is available via secondary care. Freestyle Libre 3 can only be supplied in line with current policies within Kent and Medway

**Do GPs/patient/trusts still need to agree patient contract?**

This guidance document supersedes the requirement for the patient to have a contract in place as was seen with existing Freestyle Libre patients. However, requirements are still needed as per above around education on device, clear communication with general practice and plans on who will continue to review suitability of the device which is usually the specialist. There additionally is no longer a need for a contract with Freestyle Libre but key information is still needed.

**Who can start the prescribed devices?**

For adults the endocrinology team in secondary care, the community diabetes team and the primary care team (if they have completed the appropriate training). For children this should by the secondary care team for suitability. **Where speciality teams have recommended this device, they are responsible for the first supply of the sensors and starter packs (including transmitters) and organising any training for the patient. The letters should make these points clear when asking primary care to take on prescribing.**

***Please note: These devices are new and for the foreseeable future that initiation and education on devices is carried out by specialist teams. This is to support an equitable approach across Kent and Medway. Education for primary care is being planned.***

Patients should be advised to wait until their next routine appointment. If primary care is not able to prescribe, please advise the patient to seek further advice from their specialist during their next appointment.

**A patient says that their sensor or transmitter is faulty or has fallen off- what should I do?**

Replacement sensors and transmitters must not be prescribed- the patient should be advised to contact the manufacturer for a replacement.

For Glucomen day: 0800 085 2204 <https://glucomenday.com/newplatform/en/glucomen-day-support/>

For Dexcom ONE: 0800 031 5763 or <https://www.dexcom.com/en-gb/contact-us-direct>

GlucoRx Aidex: 0800 007 5892 or info@glucorx.co.uk

**Who should supply the first prescription and organise training?**

This is the responsibility of the healthcare professional recommending the device. See pathway below

**A patient is asking for a transmitter for a rtCGM device- how does this happen?**

Transmitter lifespan for rtCGM devices is different.

* For Dexcom ONE transmitter - these need to be prescribed every 3 months on prescription. It is recommended when adding this onto a patient’s repeat/variable use repeat that it is made clear “one transmitter every 3 months, maximum 4 per year”
* For Glucomen Day- these last for 5 years and can be recharged
* For GlucoRx Aidex – up to 4 years. This needs to be ordered directly from GlucoRx.

**Can drivers use the (isCGM) or rtCGM to monitor blood glucose levels prior to driving?**

See here : <https://www.gov.uk/guidance/diabetes-mellitus-assessing-fitness-to-drive>

**How do I access training from primary care?**

Resources to access training have been listed below. Please note that registration will be required to access this training

* + [Diabetes Specialist nurse forum UK](https://www.diabetesspecialistnurseforumuk.co.uk/insulin-pumps-and-technology)
	+ [Effective Diabetes Education Now (EDEN)](https://www.edendiabetes.com/news-blog/2022/6/9/flash-and-cgm-education-pack-for-primary-care-now-available)
	+ [Association of British Clinical Diabetologists](https://abcd.care/)
	+ Training is also available for those devices that can be prescribed by the manufacturers. [Dexcom ONE](https://www.dexcom.com/en-GB/learn-dexcom-one)

[Glucomen Day](https://glucomenday.com/newplatform/glucomen-day-cgm/glucomen-day-cgm-training-and-guides/)

[GlucoRX Aidex](https://www.glucorx.co.uk/glucorx-aidex-hub/)

**What about blood glucose test strips?**

GPs or other primary care clinicians will still need to prescribe blood glucose test strips. This is to ensure that patients can test where the device is not showing reading that are expected. Whilst it is anticipated that the use of strips will be reduced to a lower level it would still be required for prescribing to patients. Blood glucose test strips should be used when symptoms do not match the readings and/or alarms. Lancet quantity should also be reduced as less glucose is usually indicated. Blood glucose test strips will also be needed for any calibration and dosing needs depending on the machine being given. Patients should be reviewed to change to formulary blood glucose meters.

Appendix 1

**Flowchart for switching patients from isCGM to rtCGM (for paediatric patients this process is initiated by secondary care team)**

Patient requests rtCGM with GP or hospital

rtCGM not indicated

Does patient meet criteria for rtCGM? Currently, those eligible for rtCGM in Kent and Medway include:

* Children with type 1 diabetes
* Children who are already receiving treatment and have moved into adult services
* Adults with type 1 diabetes who are currently using an isCGM device may be able to switch to a rtCGM device. This includes Dexcom One, Glucomen Day or GlucoRx Aidex.

No

Yes

Refer patient to diabetes specialist (can be primary care or secondary). For children this is by secondary care

*Training should include:*

* *How to use the rtCGM device*
* *Provide training materials.*

Diabetes specialist to switch patient from isCGM to suitable rtCGM device

* provide patient first prescription
* send letter to inform GP of switch and to request for ongoing prescribing of rtGCM by the GP.
* Letter to advise

Review period undertaken by healthcare team that recommended its use

**Appendix 2: Comparison of rtCGM devices. Those in green can be prescribed. Those in blue cannot be prescribed and are from hospital teams only. Acknowledgement to Diabetes Nurse forum UK**

