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Circulation:  
General Practitioners  
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Dear

**Gateway reference number 18678**

**Re: Safe care of people with Type 1 diabetes**

As you know, Type 1 diabetes is very different from Type 2 diabetes – in terms of patient care, patient experience, and prognosis. People with Type 1 diabetes are more likely to suffer diabetes complications, and have a higher mortality rate than those with Type 2.

There are 250,000 people with Type 1 diabetes in England. Their lives depend on insulin injection or pump treatment. They carry out self-blood glucose measurement (SBGM) on finger-prick tests to adjust their insulin dosage according to food, exercise, and other daily events. SBGM is essential for safety checks when feeling unwell, or in situations when the blood glucose might fall too low or too high.

Further, there are specific issues for drivers with insulin-treated diabetes- for example DVLA guidance requires of insulin- treated diabetics:

“You must **always** carry your glucose meter and blood glucose strips with you. You must check your blood glucose before the first journey and every two hours whilst you are driving.”

The potentially fatal Type 1 complication of diabetic ketoacidosis (DKA) (severe insulin lack) is increasing. 8472 cases were reported in the National Diabetes Audit in England and Wales in 2010/11. Diabetic ketoacidosis is often precipitated by gastroenteritis, for example norovirus.

In addition, Diabetes UK and other stakeholders describe increasing numbers of people with Type 1 diabetes being refused prescriptions for sufficient SBGM testing strips to be able to carry out daily testing needed to safely and confidently self-manage their diabetes.

While testing strips dispensed in primary care may appear to have a premium cost, the wider costs to the patient’s quality of life, their safety and ability to

work and to the NHS of complications of uncontrolled diabetes far outweigh these costs. Further costs for the strips in most cases also include provision of educational material, meters, and helplines for patients by the manufacturer.

In summary, it is essential that people with Type 1 diabetes are prescribed sufficient SBGM testing strips for their clinical needs. Provision of these strips and their use needs to be in context of a wider on-going patient education programme (as outlined in NICE guidance CG15, TA 60, and the NICE QIPP example Dietary Adjustment for Normal Eating or DAFNE course). This enables people with diabetes to self manage, including understanding 'sick day rules', recognising the symptoms of DKA, early action and how to seek help, and any specific considerations in light of any job they may carry out, especially if it involves driving.

GPs and pharmacists should work collaboratively with patients to ensure the optimal amount of testing strips are prescribed and supplied to type 1 diabetics. Too few can lead to serious clinical consequences. Too many can lead to wastage.

Yours Sincerely

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