

Update on Diabetes Pharmacotherapy & Monitoring

Medicines and Prescribing Network

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Aims

- To provide an update on the South East London 'Self-monitoring of Blood Glucose (finger prick checking) in Adults' Guideline and discuss implementation
- To provide an update on use of continuous glucose monitoring (CGM) in type 2 diabetes
- To update on use of Mounjaro™ (tirzepatide)
- To update on current medication shortages in diabetes

Self-monitoring of Blood Glucose (finger prick checking) in Adults Guideline



- Updated guidance available on : [SEL IMOC - Diabetes - NHS South East London](#)
- Key changes:
 - Acknowledges those on continuous glucose monitors (CGM) in addition to blood glucose meters
 - CGM device/reader fails, is damaged, is lost or to facilitate glucose testing when use of the CGM device is not appropriate e.g. in line with Driver and Vehicle Licensing Agency (DVLA) requirements.
 - Includes a 'Preferred Blood Glucose Meter, Ketone Meter, Test strip and Lancet Choice' section
 - Blood glucose test strips required for insulin pumps

Insulin Pumps: If an individual is using an insulin pump they may require a meter that synchronises with the pump, therefore the meter should not be changed in primary care. Please refer to the specialist teams if any review is required. Examples of insulin pumps which may require specific meters are:

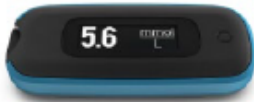

| Insulin Pump | Compatible test strips |
|--|--|
| Medtronic <u>MiniMed</u> [™] 780G | <u>Accu-chek</u> Guide Test Strips |
| Medtronic <u>MiniMed</u> [™] 640G | Contour Next Test Strips |
| Medtronic <u>MiniMed</u> [™] 670G | Contour Next Test Strips |
| <u>mylife</u> YpsoPump | <u>mylife</u> Aveo or <u>mylife</u> Unio |

Preferred Blood Glucose Meter, Ketone Meter, Test strip and Lancet Choice

- NHS England (NHSE) completed an evaluation of available blood glucose and ketone meters, testing strips and lancets in April 2023 and produced a [recommended list](#).
- Integrated Care Systems (ICS) in England are expected to use meters , lancets and test strips from this list and uptake is being monitored by NHSE
- SEL ICS has developed a preferred list based on input from specialist diabetes teams across SEL
 - Rationale:
 - Unable to stock all meters on NHSE list- 'Do once' approach across SEL
 - Less meters for staff to know how to use well – instils confidence
 - Risks: Some practices/specialist teams may have already implemented preferred meter(s), stock availability, if the NHSE list changes and preferred SEL meter is no longer listed
 - Process:
 - Diabetes specialist from across SEL ICS tested all meters on the NHSE recommended list
 - Manufacturer(s) completed data sheet/ meter information prior to the meeting
 - At the meeting – manufacturer(s) gave a 5min demonstration of the meter and 5 min for questions
 - Diabetes specialist scored the meters to set criteria.
 - Preferred meter choices based on highest scores

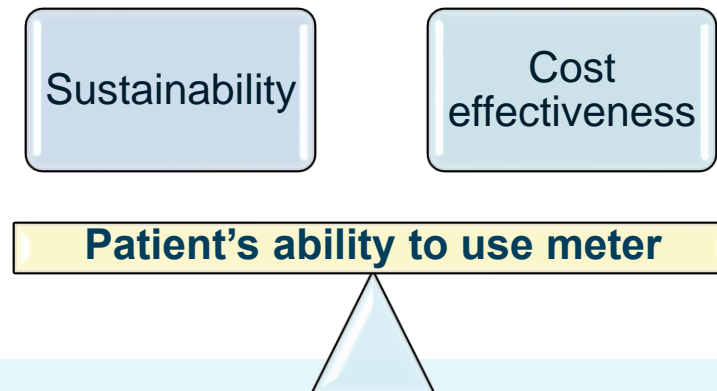
| Category | Blood Glucose and Ketone Meters: Suitable for Type 1 diabetes or ketosis prone Type 2 diabetes | |
|-------------------------------------|--|---|
| Preferred meters: | GlucoFix Tech GK | 4SURE Smart Duo |
| Company: | A.Menarini Diagnostics | Nipro Diagnostics |
| |  |  |
| Enzyme technology | Glucose Oxidase | GDH-FAD (glucose) |
| Connectivity | QuickLink NFC and USB cable | Bluetooth and USB cable |
| Applications | GlucoLog Lite, GlucoLog Web & RapidCalc Bolus Advice App and Glooko | Diabetes: M and Glooko |
| Memory | 730 results | 1000 results |
| Sample Size | 0.5µL- Glucose / 0.8 µL- Ketone | 0.5µL- Glucose / 0.8 µL- Ketone |
| Reaction time | 5 Seconds- glucose/ 8 Seconds- ketone | 5 Seconds- glucose/ 10 Seconds- ketone |
| Warnings | Hypo/Hyper alert up to six settable acoustic alarms (3 glucose alarms & 3 ketone alarms) | High and low glucose and ketone levels |
| Alerts | Hypo & hyper alerts & four markers available | Error messages, high and low glucose, and ketone levels |
| Other features | No coding needed Meal markers Strip ejector Averages 1, 7, 14, 30, 60, 90 days | Pre/post meal markers Strip ejector button and light Suitable for people with gestational diabetes Strip port indication light, Averages 3, 7, 14, 30, 60, 90-day test averaging tool |
| Recommended cohorts | Carbohydrate counting Cognitive impairment Dexterity Group 2 driver Learning difficulties No fixed abode Unable to read English Visually impaired | Carbohydrate Counting Cognitive Impairment Dexterity Group 2 Driver Learning Difficulties No Fixed Abode Unable to read English Visually Impaired |
| Technical help | www.glucomen.co.uk/glucofix-tech | https://www.nipro-diagnostics.co.uk |
| Patient helpline | 0800 243667 (8:30 - 17:00 Mon to Fri) | 0800 0858808 (8.30 to 17.00 Mon to Fri) |
| Compatible Blood Glucose test strip | GlucoFix Tech Sensors Test Strips | 4SURE Test Strips |
| Blood Glucose Test Strips Cost/50 | £5.95 Pack/50 | £8.99 Pack/50 |
| Blood glucose test strip Expiry | 12 months from opening | 24 months from date of manufacture |
| Compatible Ketone Test Strips | GlucoFix Tech B-Ketone Sensors Test Strips (not supplied with meter) | B 4SURE beta-ketone Test Strips (1 supplied with meter) |
| Ketone Test Strips Cost/10 | £9.95 per Pack/10 | £9.92 Pack/10 |
| Ketone Test Strip Expiry | 18 months from the date of manufacture | 18 months from date of manufacture |
| Lancet | GlucoJect PLUS 0.22mm/33g (10 supplied with meter) | 4SURE Lancets (10 lancets supplied with meter) |
| Cost per 100 lancets | £3.77/100 | £3.45/100 |
| Contact details for ordering meters | Miriam Salib, Email msalib@menarinidiag.com , Phone 07710062415 | sales.support@nipro-group.com |

| Category | Blood Glucose Only Meters: Suitable for the majority of people with Type 2 diabetes | | |
|-------------------------------------|--|--|--|
| Preferred meters: | GlucoFix Tech GK | Contour Plus Blue | Finetest Lite |
| Company: | A.Menarini Diagnostics | Ascensia | Neon Diagnostics |
| |  |  |  |
| Enzyme technology | Glucose Oxidase | Glucose Dehydrogenase (GDH), unaffected by oxygen therapy | GDH-FAD |
| Connectivity | QuickLink NFC and USB cable | Bluetooth, USB Cable, Smart phone connectivity | Bluetooth, USB Cable & Smart phone connectivity |
| Applications | GlucoLog Lite, GlucoLog Web & RapidCalc Bolus Advice App Glooko | Contour Diabetes App, GlucoContro.online, Glooko, Tidepool, Diabetes My Way | Finetest Lite App Glooko |
| Memory | 730 results | 800 results | 500 results on meter, unlimited on app |
| Sample size | 0.5µL- Glucose | 0.6µL- Glucose | 0.5µL- Glucose |
| Reaction time | 5 Seconds | 5 Seconds | 5 Seconds |
| Warnings | Hypo/Hyper alert up to six settable acoustic alarms (3 glucose alarms & 3 ketone alarms) | Lo and Hi warnings if the reading is outside the measurement range. (0.6mmol/L to 33.3mmol/L) | Inserting used strips, Low blood volume, Low battery, High/low temperature, Operation issues |
| Alerts | Hypo & hyper alerts & four markers available | Alarm reminders can be set for 30, 60, 90 and 120 minutes | Hypo and Hyper Alerts, Three Meal Markers, Five programmable alarm |
| Other features | No coding needed Meal markers Strip ejector Averages 1, 7, 14, 30, 60, 90 days | SmartCOLOUR® target range indicator, Meal markers (fasting, pre and post meal) Second Chance Sampling Wide haematocrit range (0%-70%) | One-Step Bluetooth pairing Auto Strip Ejector No coding needed Programmable average readings |
| Additional cohorts | Carbohydrate counting, Group 2 driver, renal dialysis | Group 2 driver, renal dialysis | Group 2 driver, renal dialysis |
| Technical help | www.glucomen.co.uk/glucofix-tech | https://www.diabetes.ascensia.co.uk/support | https://www.neondiagnosics.co.uk/ |
| Patient helpline | 0800 243667 (8:30 - 17:00 Mon to Fri) | 0345 600 6030 or 0800 170 1060 (09:00 17:00 Mon to Fri) | 0800 131 3378 (24 hours a day) |
| Blood glucose test strip | GlucoFix Tech Sensors Test Strips | Contour Plus Test Strips | Finetest Lite test strips |
| Cost per 50 test strips | £5.95 Pack/50 | £5.95 Pack/50 | £5.35 Pack/50 (2 x 25 strip pots) |
| Test strip expiry | 12 months from opening (within date of expiry) | 24 months from manufacture | 6 months after opening (within date of expiry) |
| Lancets | GlucoJect PLUS 0.22mm/33g lancets (10 supplied with meter) | MICROLET® 0.5mm/28G Lancets (5 supplied with meter) | GreenLan 28G Lancets (10 supplied with meter) |
| Cost per 100 lancets | £3.77/100 | £2.99/100 | £3.00/100 |
| Contact details for ordering meters | Miriam Salib: Email msalib@menarinidiag.com Phone 07710062415 | Jamie Goldstein, Business Development Manager 07469 912 554 | Freephone - 0800 009 3378 Email – info@neondiagnosics.co.uk Local contact – Vipul Upadhyaya 07526 507576, Vipul@neondiagnosics.co.uk |

| Category | Blood Glucose Only Meter: Type 2 Diabetes Gestational diabetes requiring GDM-Health app compatibility | Blood Glucose Only Meter: Voice Meter |
|-------------------------------------|--|--|
| Preferred meters: | WaveSense JAZZ wireless | On Call Extra Voice |
| Company: | AgaMatrix | Connect 2 Pharma |
| |  |  |
| Enzyme Technology | Glucose Oxidase | Glucose Oxidase |
| Connectivity | Bluetooth | USB download capability |
| Applications | AgaMatrix diabetes manager app ALLY diabetes patient management system, GDM-Health, Diasend, Glooko, Apple Health, My mHealth, Social Diabetes | On Call® Diabetes Management Software |
| Memory | 1000 results | 500 results |
| Sample Size | 0.5µL | 0.4 µL |
| Reaction time | 5 seconds | 5 seconds |
| Warnings | Faulty strip, Low/dead battery, Temperature | Hyper, Hypo, Ketone |
| Alerts | High and Low results | Five daily test reminders |
| Other features | Auto-detection of QC Auto-synchronisation Simple pairing | Re-dosing capability within 3 seconds Strip ejector Soft touch buttons Easy insert strip port Audio Guidance Audible fill detection |
| Technical help | www.agamatrix.co.uk | https://www.oncallmeters.co.uk/ |
| Patient helpline | 0800 093 1812 (09:00 – 18:30 Mon to Fri) | 0203 3074646 (09:00 – 17:00 Mon to Fri) |
| Blood Glucose Test Strip | WaveSense JAZZ Test Strips | On Call Extra Test Strips |
| Cost per 50 test strips | £8.74 Pack/50 | £5.20 Pack/50 |
| Test strip Expiry | 6 months from opening (within date of expiry) | 13 months from opening (within date of expiry) |
| Lancets | WaveSense Ultra-Thin 0.2mm/33G or 0.35mm/28G lancets (30 supplied with meter) | On call 30G lancets (10 supplied with meter) |
| Lancet cost | £5.43/200 | £2.17/100 |
| Contact details for ordering meters | Shanifa Campbell 07733 453829 scampbell@agamatrix.com | Nick Robinson Nick.robinson@connect2pharma.co.uk |

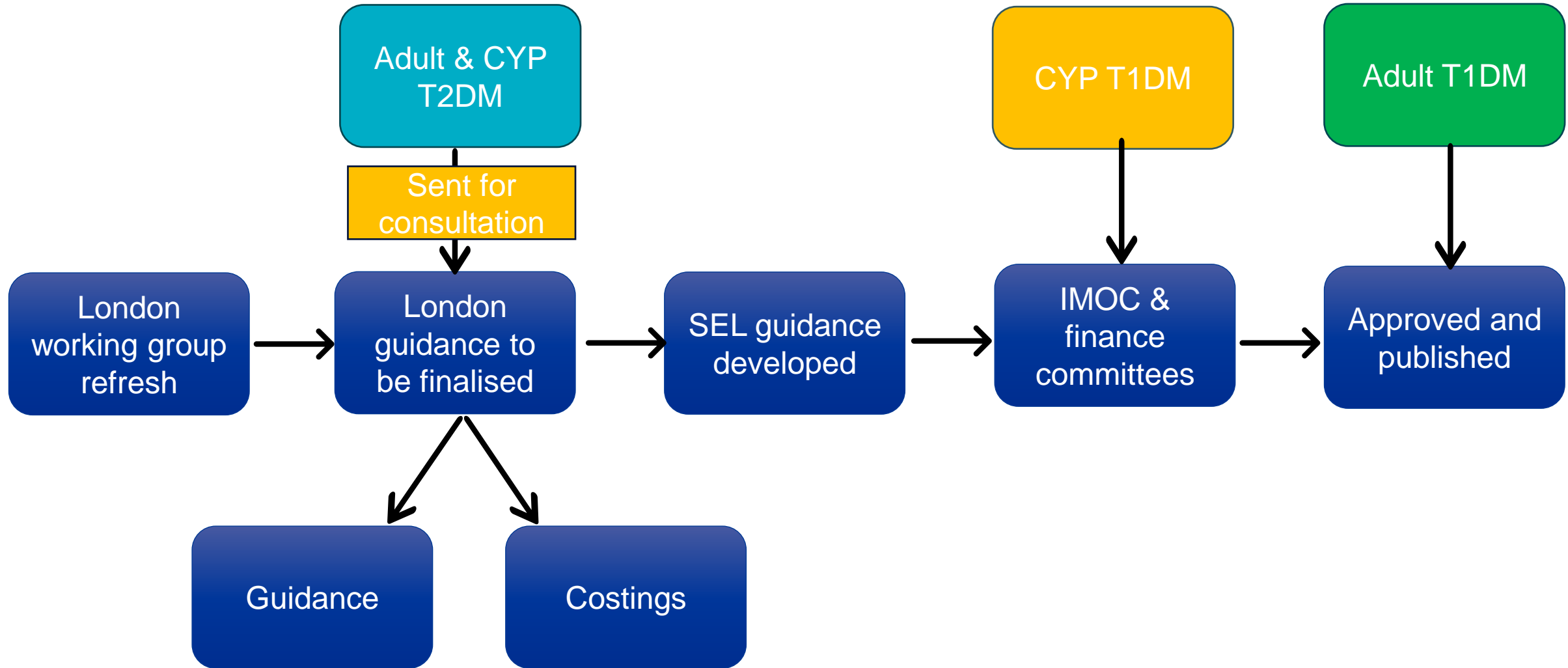
Roll Out

1. All adults requiring a new blood glucose meter (**new initiations or replacement meters**) should be started on a meter that is on the SEL preferred list.
2. For adults on existing blood glucose meters, to transition to SEL preferred meters in a phased manner:
 - a) All adults using glucose test strips that are **not** on the NHSE or SEL list where glucose test strips are priced >15p per strip (> £7.50/50)
 - b) All adults using glucose test strips that are on the NHSE list and not on the SEL list where glucose test strips are priced >15p per strip (> £7.50/50)



Update on Continuous glucose monitoring (CGM)

SEL CGM Update



NICE Type 2 Diabetes (adults) - CGM

- **Offer isCGM to adults with T2DM on multiple daily insulin injections (≥ 2 injections) if any of the following apply:**
 - have recurrent or severe hypoglycaemia
 - have impaired hypoglycaemia awareness
 - have a condition or disability (including a learning disability or cognitive impairment) that means they cannot self-monitor blood glucose by CBG but could use isCGM device (or have it scanned for them)
 - they would otherwise be advised to self-measure at least 8 times a day
- **Offer isCGM in insulin-treated T2DM when otherwise would need help from a care worker or HCP to monitor BG**
- **Consider rtCGM as an alternative to isCGM if available for the same or lower cost**
- **Additional groups**

NICE Type 2 Diabetes (CYP) - CGM

- **Offer rtCGM to CYP with T2DM if any of the following apply:**
 - have a need, condition or disability (including a mental health need, learning disability or cognitive impairment) that means they cannot engage in monitoring glucose levels by CBG
 - they would otherwise be advised to self-measure at least 8 times a day
 - have recurrent or severe hypoglycaemia
- **Consider rtCGM for children and young people with type 2 diabetes who are on insulin therapy**
- **Consider isCGM for CYP with T2DM aged 4 years and over who are on insulin therapy if:**
 - rtCGM is contraindicated for them or
 - they express a clear preference for isCGM.
 - In May 2023, use of isCGM for children aged 3 years and under was off licence.

Practical points around CGM

- **If using CGM, still need BGTS but should be less**
 - T1 adults – recommend ~200 strips/year (may need more)
 - T1 CYP – recommend ~ 50 strips/month (may need more)
- **Current use in T2DM**
 - BGTS still needed
- **BGTS: use SEL recommended meters/test strips**
 - See guidance on insulin pump compatibility
- **Spare sensors/replacement sensors**
- **MHRA advice:**
- [\(MHRA\): Alert to users of FreeStyle Libre flash glucose monitoring system regarding skin reactions to sensor adhesive](#)
 - Use of barrier methods to reduce skin reactions may affect device performance
- [\(MHRA\): Continuous Glucose Monitor and Insulin Pump Yellow card reporting.](#)
 - Report regardless of whether or not the issue led to an injury or harm
 - Report even if considered to be a result of user error

Problems we would like to hear about from you include:

- any failure of a device to perform as expected, or in line with the information provided by the manufacturer
- concerns with accuracy of results from your CGM
 - *as part of your report, please tell us what the readings were on both the CGM and the [approved blood glucose meter \(see page 6\)](#) including the length of time between when the 2 readings were taken*
- concerns with accuracy of delivery from the insulin pump (for example, suspected underdose or overdose, unexpected bolus doses, non-delivery of insulin)
- connectivity issues between the various parts of the diabetes management system
- failure of a device to perform as intended throughout the expected lifespan
- concerns with the touchscreen, display or buttons, particularly following software updates
- physical failures, including leaks and cracks
- failure of adhesive and reaction to adhesive. If a patch test was carried out, please let us know
- display issues
- power issues or unexpected shutdown
- concerns around device documentation (such as the instructions for use, or the technical/operation manual). For example, this may include:
 - missing or confusing information
 - lack of information on compatibility with other products, including consequences of using an incompatible product
 - documents missing on receipt of a device

Case study – Mr AM

Mr AM, 46 Male, comes to see you for his annual diabetes review.

PMHx: T2DM (since 2016), HTN, asthma, hyperlipidaemia, CKD stage 2

Current medications:

- metformin 1g BD
- dapagliflozin 10mg OD
- sitagliptin 100mg OD
- gliclazide 40mg BD
- ramipril 5mg OD
- amlodipine 5mg OD
- atorvastatin 40mg OD

Results: HbA1c 74 mmol/mol, BMI 39kg/m², weight 118kg eGFR 62ml/min, ACR 6.4 mg/mmol, Qrisk 28%

What discussions will you have with Mr AM?

What is the next most suitable treatment option for Mr AM?



Mr AM – patient pathway

- During the consultation, different options available for treatment escalation have been discussed
- Together you have decided that a GLP-1 RA is the most suitable option for him

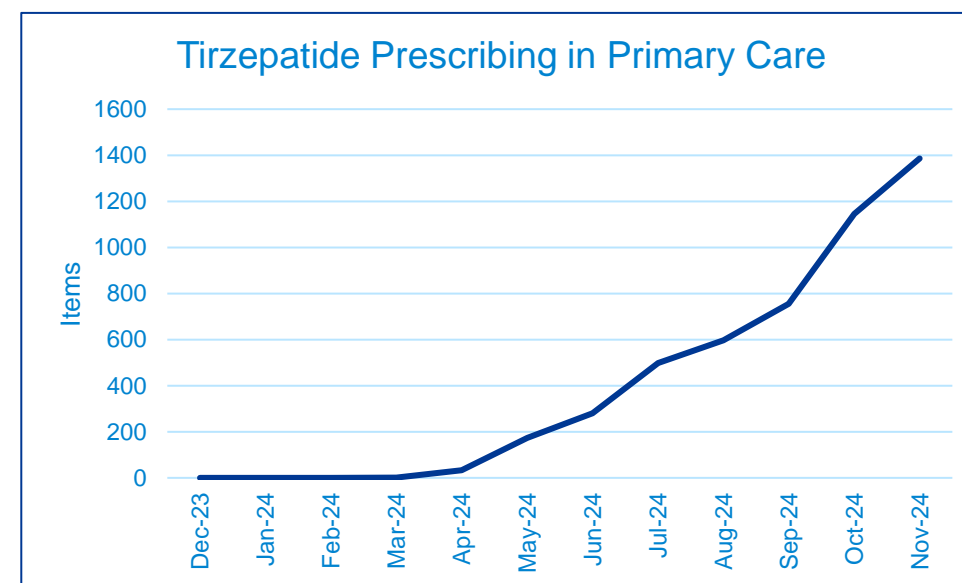
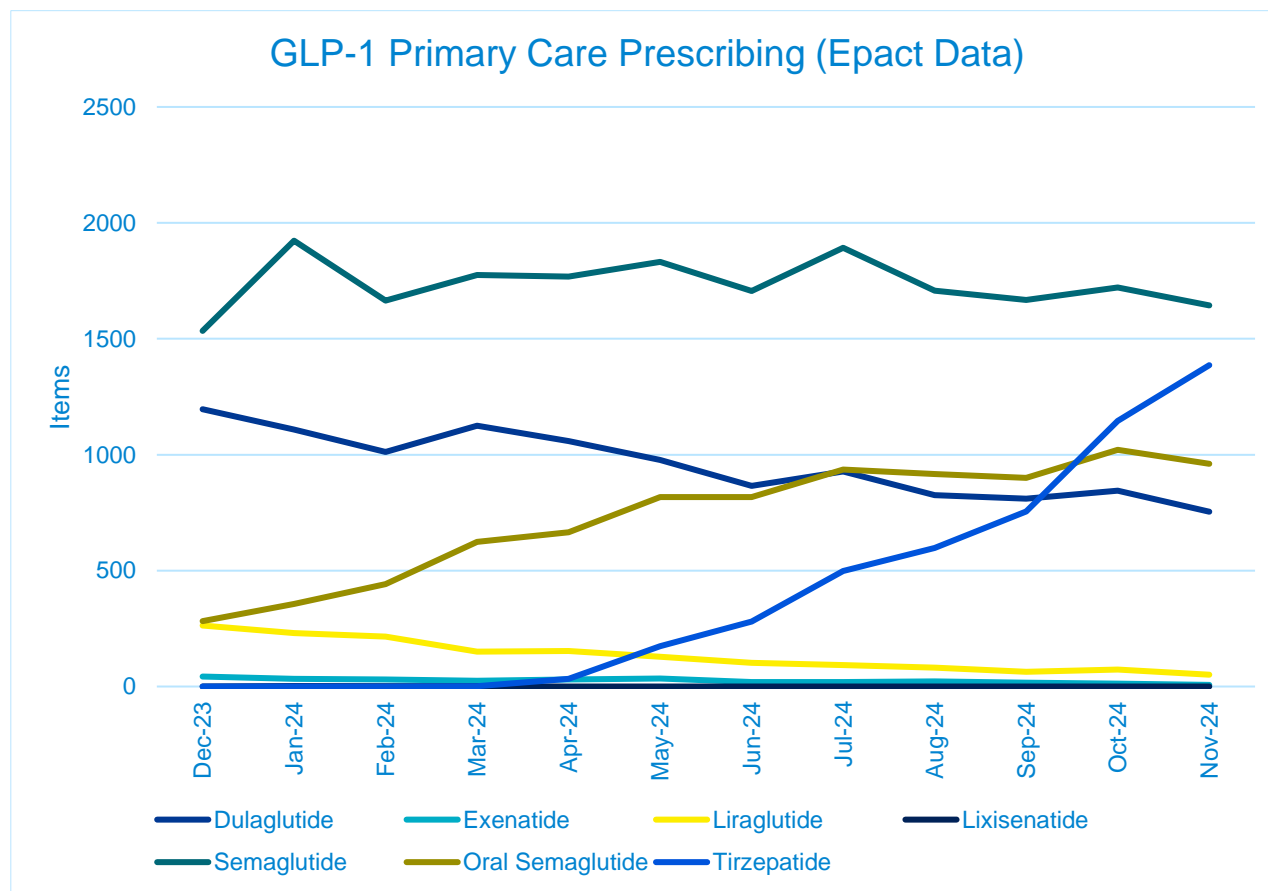
Rationale: HbA1c not at target on max oral treatment and BMI 39kg/m²

Which GLP-1?

Would you make any other changes to his current medications?

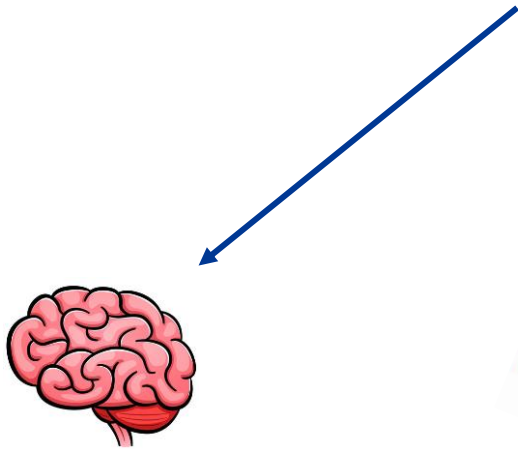
Metformin 1g BD,
Dapagliflozin 10mg OD,
Sitagliptin 100mg OD,
Gliclazide 40mg BD,
Ramipril 5mg OD,
Amlodipine 5mg OD,
Atorvastatin 40mg OD

GLP-1 prescribing data in primary care

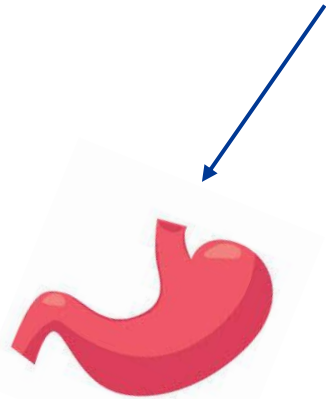


Mounjaro™ (tirzepatide)

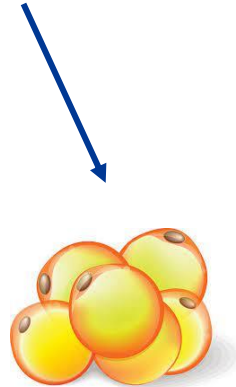
Incretin gut hormones: Glucagon like peptide 1 (**GLP-1**) + Glucose dependent insulinotropic polypeptide (**GIP**) are released in response to food broken down in the GI tract



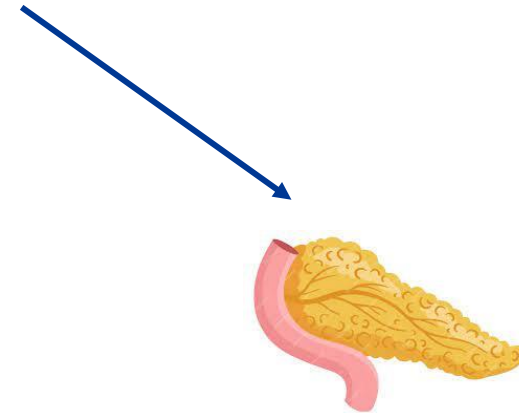
GLP1 + GIP
promotes
satiety and
reduces
appetite



GLP1 + GIP
delay gastric
emptying



GIP increases
insulin sensitivity:
increased fatty
acid and
peripheral
glucose uptake by
fat tissue



- **GLP1**: ↑ insulin secretion
↓ glucagon secretion
- **GIP**: ↑ insulin secretion
↓ glucagon secretion during hyperglycaemia
↑ glucagon secretion during euglycaemia or hypoglycaemia

Criteria for Prescribing

- Tirzepatide is recommended for treating type 2 diabetes alongside diet and exercise in adults when it is insufficiently controlled only if:
- Triple therapy with metformin and 2 other oral antidiabetic drugs is ineffective, not tolerated or contraindicated, **and**
 - they have a BMI of 35 kg/m² or more, and specific psychological or other medical problems associated with obesity,**OR**
 - they have a BMI of less than 35 kg/m² **and**:
 - insulin therapy would have significant occupational implications, **or**
 - weight loss would benefit other significant obesity-related complications.

*Use lower BMI thresholds (usually reduced by 2.5 kg/m²) for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean family backgrounds.

Evidence: Summary of trials

| | Trulicity® (Dulaglutide) | Victoza® (Liraglutide) | Ozempic® (Semaglutide) | Rybelsus® (Semaglutide) | Mounjaro® (Tirzepatide) |
|---|---|--|--|---|---|
| Phase III trials: HbA1c reduction (mmol/mol) | AWARD trials 1.5mg: mean 16.6 3mg: mean 18.7 4.5mg: mean 20 | LEADER trials 1.2mg: 9 – 12 1.8mg: 11 - 17 | SUSTAIN trials 0.5mg: 13 – 17 1mg: 17 – 20 | PIONEER trials 7mg: 11 – 13.1 14mg 13.1 – 15.3 | SURPASS trials 5mg: 20.4 – 24.5 10mg: 20.7 – 26.6 15mg: 22.7 – 28.2 |
| Phase III trials: Weight loss (kg) | 1.5mg: mean 3.5 3mg: mean 4.3 4.5mg: mean 5.0 | 1.2mg: 1 – 2.6 1.8mg: 2 – 2.9 | 0.5mg: 3.7 – 4.3 1mg: 5.2 – 6.1 | 7mg: 2.2 – 2.7 14mg 3.1 – 4.3 | 5mg: 6.2 – 7.8 10mg: 7.8 – 10.7 15mg: 9.5 – 12.4 |
| CVOT: MACE-3 outcome | REWIND: 1.5mg RRR 12% (HR 0.88) Superior vs placebo | LEADER: 1.8mg RRR 13% (HR 0.87) Superior vs placebo | SUSTAIN-6: 0.5mg/1mg RRR 26% (HR 0.74) Superior vs placebo | PIONEER-6: Non-inferior to placebo. Superiority not proven SOUL: awaiting publication | SURPASS CVOT: ongoing - expected 2025 |
| Hospitalisation HF (HHF) | HR 0.93 No significant difference | HR 0.87 No significant difference | HR 1.11 No significant difference | HR 1.11 No significant difference | SURPASS trial ongoing – expected 2024 |
| Renal outcomes | RRR 15% (HR 0.85) Lower rate composite renal events | RRR 22% (HR 0.78) Lower rate composite renal events | HR 0.64 Lower rate composite renal | HR 0.64 Lower rate composite renal | SURPASS trial ongoing – expected 2024 |

- Lifestyle interventions to support therapy and need for HbA1c & weight reduction for continuation at 6 months
- Dose, timing of dose, missed dose & sick day rules (see Sick Day Rules guidance)
- Blood glucose monitoring requirements (including driving in line with Driver and Vehicle Licensing Agency (DVLA) guidance)
- Hypoglycaemia risk and actions to be taken e.g., dose reduction of concomitant medications (in particular insulin & sulfonylureas (SU))
- Hypoglycaemia management
- Side effects (see page 5)
- For injections: subcutaneous use only. Educate on injection technique, storage & safe sharps disposal
- For Rybelsus[®] tablet: educate on method of administration
- Ensure adequate contraception if relevant (See SPC for further information and page 4)
- Follow up requirements including contact details for the team
- Provision of written educational material where relevant
- Provide blood form for repeat renal profile before next appointment

Side-effects: MHRA Drug Safety Update

- Common gastrointestinal side-effects of GLP-1RAs treatment (including: nausea, vomiting, diarrhoea and constipation) can persist for several days and may affect more than 1 in 10 patients. This may result in dehydration, which if severe may lead to other serious health complications such as kidney damage resulting in hospitalisation
- Throughout treatment stay well hydrated by drinking plenty of fluids (such as water) to avoid dehydration, which can sometimes occur after experiencing gastrointestinal side-effects including vomiting and diarrhoea
- Other serious but less common side-effects of GLP-1RAs include acute gallstone disease, pancreatitis, and serious allergic reactions

Mounjaro™ Kwikpen



- 1 pen = 4 doses (28-day supply)
- Pen needles are **not** supplied in the pack – separate prescription needed
- Patient information booklet: ukie-mounjaro-patient-booklet.pdf
- Injection demonstration video: [Intended to be viewed in full screen, please click the double arrows at the bottom right of the video screen to enlarge.](#)
- Reports of pens ‘jamming’ – report via yellow card scheme

NICE TA 1026: Tirzepatide (Mounjaro™) for managing overweight and obesity

Published 23rd December 2024

Criteria: • an initial body mass index (BMI) of at least 35 kg/m²* and
• at least 1 weight-related comorbidity.

Alongside a reduced-calorie diet and increased physical activity in adults

NICE estimates an eligible population of around 3.4 million people in England

NICE agreed 220,000 patients across England to be treated in next 3 years

Initially, those with the most urgent need will be prioritised to receive the medication

NHS England are engaging with relevant clinic bodies to establish which weight related co-morbidities will be prioritised and developing a roll out plan.

Expecting NHSE interim commissioning guidance ~ February 2025

Prescribing expected :

Specialist weight management services – spring 2025

Primary care – summer 2025

Until then Mounjaro will not be available for weight loss purposes and is not currently on the SEL formulary for weight loss

- For a maximum of 2 years
- **Within a specialist weight management service** providing multidisciplinary management of overweight or obesity (including but not limited to tiers 3 and 4)

Phased roll out approach – Phase 1 criteria

- Active malignancy where you need to quickly lose weight for planned therapy, for example radiotherapy or surgery.
- Need urgent weight loss for organ transplant.
- Have idiopathic intracranial hypertension (IIH), needing frequent lumbar punctures and/or visual compromise.
- Undergoing planned time-sensitive surgery for life-limiting conditions, where a high body mass index (BMI) is the main barrier to surgery.
- If you are under the care of a fertility service and weight loss is needed for assisted conception.
- Have obesity hypoventilation syndrome (OHS)

Red listed drug – GPs can not prescribe, can only be prescribed in specialist weight management services

Private Prescribing

- Encourage patients to disclose private prescriptions at appointment(s) or on admission
 - to ensure we have the full medication history
 - to ensure they receive appropriate care
- Advise patients if they do obtain a private prescription (from a non-NHS prescriber), ensure that this is from an authorised source to avoid the risk of receiving fake medication, some of which have been investigated and found to contain insulin

Ensure that:

- Any online doctor service is registered with the [Care Quality Commission \(CQC\)](#) and the [General Medical Council \(GMC\)](#)
- Any online pharmacy is registered with the [General Pharmaceutical Council \(GPhC\)](#)

It is the private providers responsibility to ensure the medication they are prescribing is appropriate for the patient

- Report suspected adverse drug reactions to the Yellow Card scheme via [Yellow Card | Making medicines and medical devices safer](#)
- [SEL IMOC - Policies & general guidance - NHS South East London](#)

Current Diabetes Shortages

- **Tresiba 100units/ml FlexTouch Pen**

Expected back January 2026



- **Fiasp 100units/ml FlexTouch Pen**

Expected back January 2026



- **Insulatard InnoLet® 100units/ml disposable device**

Discontinued --> switch to alternative



- **Levemir InnoLet® 100units/ml disposable device**

Discontinued --> switch to alternative

- **Injectable GLP1-RAs (semaglutide, dulaglutide, exenatide (disc.), liraglutide)**

Resolved??

Expect to see more oral semaglutide (Rybelsus®) and newer agent Tirzepatide (Mounjaro®)!

New shortages/discontinuations

- **NovoRapid FlexTouch insulin** (stock deplete March 2025)

Discontinued --> switch to alternative



- **Insulatard Penfill insulin (all preparations)** (March 2025)

Discontinued --> switch to alternative



- **Levemir insulin all preparations** (December 2026)

Discontinued --> expecting guidance



- **Additional shortages.....**

SEL Diabetes Programmes

- Healthier You – NHS Diabetes Prevention Programme
 - Refer patients at risk of developing Type 2 diabetes to learn about healthy sustainable lifestyle changes they can make overtime to reduce their risk
 - Referral form and referral pathway can be found on DXS
 - 3 different types of programmes available
 - Face-to-face group programme
 - Digital programme
 - Remote programme
- NHS T2DR Programme - Type 2 diabetes Remission programme
 - Type 2 diabetes behaviour change programme to help potentially achieve diabetes remission
 - Supports people with type 2 diabetes to lose weight, increase physical activity & reduce their medication needs
 - Referral form and eligibility criteria available on DXS
 - 2 different types of programmes available
 - Digital coaching
 - In-person coaching



Available Learning Resources

- PrescQIPP Subscription – *Management of type 2 diabetes in adults*
 - SEL ICB have purchased licenses for access to PrescQIPP courses to support with delivery of key medicines optimisation priorities.
- *EDEN: Early Onset type 2 diabetes course for healthcare professionals*
 - NHSE have funded a new online course aimed at enhancing healthcare professionals' expertise in managing early onset type 2 diabetes (ages 18-39)
 - Raises awareness of the specific risks & challenges faced by younger adults with type 2 diabetes
- *SEL IMOC Diabetes Guidance*
 - Lots of guidelines and fact sheets available on SEL IMOC page under 'Diabetes'
 - Includes advice on pen needles, Continuous Glucose Monitoring and managing shortages

All these resources are available for free for healthcare professionals

Any Questions ?