

INPUT

*Step-by-step
guide to insulin
pump access*

An insulin pump can help you gain tighter control of your diabetes because it allows you to adjust your insulin doses according to your body's needs. This minimises everyday high and low glucose swings and long-term complications. Insulin doses are also much more precise than any available pen or syringe and having only rapid-acting insulin in your system can give you more stable and predictable control.

Insulin pumps can offer you a better quality of life and a more flexible schedule, but this technology does require motivation for self-care. In order to receive NHS funding, you will need your consultant's recommendation for pump therapy.

Step 1: Speak to your diabetes specialist team or consultant at the hospital clinic

According to the NICE technology appraisal on insulin pump therapy (TA151), only a specialist team, normally including a doctor with a specialist interest in insulin pump therapy, can decide whether or not you are suitable for insulin pump therapy – not just your GP. If you don't have a diabetes specialist team, ask your GP to refer you to a pump-friendly clinic. We have a list of clinics on the INPUT website that might be a good starting point.

Demonstrate your commitment to good diabetes control

- You adhere to multiple daily injections (MDI, 4 or more injections/day)
- You check your blood glucose 4 or more times/day and act on results
- You count carbohydrates and adjust mealtime insulin doses
- You adjust insulin for exercise, illness, stress
- You keep and review diabetes self-care logs

Step 2: Find out if you meet NICE criteria for NHS funding

NICE criteria, Technology Appraisal 151 (2008)

Only for type 1 diabetes (there is insufficient evidence to routinely recommend pumps in type 2 diabetes, except for individual cases)

- **Under 12 years old:** MDI is inappropriate or impractical
- **Aged 12 or older:** hypos occur frequently or without warning, causing anxiety about recurrence and a negative impact on your quality of life **OR** your HbA1c is still 8.5% or above despite carefully trying to manage your diabetes, including the use of Lantus or Levemir

If you meet the NICE criteria and your consultant recommends pump therapy, funding cannot be refused. Contact us if there are any problems.

If you don't meet the NICE criteria but you do fall under recommendations from the Association of British Clinical Diabetologists (ABCD), your clinic will need to make a strong case for you to be granted funding. See overleaf for the recommendations

Consultant's recommendation

Your consultant agrees you have a clinical need for an insulin pump and have the necessary commitment and skills to use the technology safely and effectively

ABCD recommends that insulin pump therapy is also considered in the following situations:

- Pregnancy
- Acute painful neuropathy or symptomatic autonomic neuropathy if conventional treatment fails to enable adequate blood glucose control
- Hypoglycaemia unawareness
- Extreme insulin sensitivity
- Needle phobia
- Severe insulin resistance with poor blood glucose control (especially if type 2)
- Specific quality of life issues:
 - Pathological fear of hypoglycaemia
 - Marked glycaemic excursions/ dawn phenomenon
 - Excessive number of injections for optimised control
 - Impaired exercise capacity, abnormal eating behaviour or an unacceptable number of sick days
 - Shift work or frequent travel across time zones
 - *In children:* sub-optimal school performance, exclusion from aspects of a full school life; behavioural problems (for example, mealtimes); adverse impact on family dynamics

Step 3: Identify any educational needs

You may need to learn more about diabetes management in order to receive a consultant's recommendation for pump therapy

Some hospitals require pump candidates to take a Dose Adjustment for Normal Eating (DAFNE) course or similar training, but NICE only specifies 'structured education'. You may have to wait up to a few months for training, depending on staff resources. You can start learning to carb count at home, using resources listed on the INPUT website

If you meet the NICE criteria but your consultant does not think you are suitable for pump therapy:

1. Ask lots of questions – why do they think you are unsuitable? What changes do they think will improve your diabetes control without a pump? Is there another consultant in the clinic who is more familiar with pump therapy?
2. Consider their decision – is the consultant's assessment fair and sensible? Do suggestions for improved control seem realistic and practical? Do you have unrealistic expectations?
3. Ask your GP to refer you to a pump-specialist clinic – you have the right to ask your GP to refer you to any NHS hospital for a second opinion. If they won't, contact INPUT or your MP for further help and advice

Step 4: Funding is arranged

Your diabetes care team will write to the local health commissioners regarding funding, and arrange your pump training. Contact INPUT if you need to get involved because funding is refused

NB:

- You will not normally be allowed to buy the pump yourself and then obtain NHS funding for consumables
- Continuous glucose sensors that may be available separately are not currently routinely funded by the NHS and funding has to be applied for on an individual basis

Step 5: Find out from your care team when you will be trained, and prepare to start your new therapy

Ongoing learning is an important aspect of living with pump therapy, particularly within the first few months. By connecting with experienced pump users online or in person, you can benefit from helpful advice and support. You will find many links to different online forums, social media and physical get-togethers on the INPUT website, as well as recommendations for books and other resources

The INPUT Mission

INPUT was founded in 1998 as an independent voluntary organisation by John Davis MBE, an insulin pump user. We became a registered charity in 2013 and continue to be run by insulin pump users and their families

We aim to help any person who could benefit from insulin pump therapy, and has motivation to use it, to access it through the NHS. Our mission is to help people access diabetes technology with support from the NHS, including insulin pumps, smart glucose meters and continuous glucose monitors.

Who we are

We are a registered charity with key staff responsible for day-to-day running:

Mrs Lesley Jordan

Chief Executive and pump user

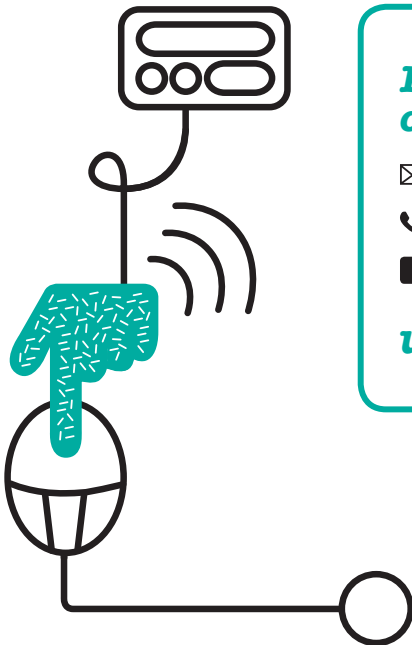
Mrs Melissa Holloway

Chief Adviser and pump user

We also have an advisory board of healthcare professionals and a board of trustees.

In addition, volunteers help with INPUT exhibitions and advocates point people in our direction.

INPUT Patient Advocacy is a charity registered in England and Wales (no. 1150609). Registered address: First Floor, 50 Brook Street, London W1K 5DR. Registered as a company limited by guarantee in England and Wales (no. 08289511)



***Please visit our website or
contact us for more information:***

✉ info@inputdiabetes.org.uk

☎ 0800 228 9977 (answerphone)

📘 🐦 INPUTdiabetes

www.inputdiabetes.org.uk

INPUT *supporting your access
to diabetes technology*