NHS GG&C Introduction of Freestyle Libre ® flash glucose monitoring system v2 (November 2021)

Background

The Freestyle Libre® flash glucose monitoring system is a sensor based, factory-calibrated system that measures interstitial fluid (not blood) glucose levels in people (aged 4 years and over) with diabetes mellitus, including pregnant women.

In January 2018, the Scottish Diabetes Managed Clinical Network Lead Clinicians issued a position statement on the use of Freestyle Libre® flash glucose monitoring system, which was considered by the NHS GG&C Prescribing Management Group at their meeting on the April 2018.

It was agreed to make Freestyle Libre® available for use in NHS GG&C, as per the recommendations in this January 2018 position statement.

This has now been superseded by the SHTG guidance as follows.

Recommendations for use of freestyle libre in NHSGGC, as per SHTG guidance (June 2018)

SHTG Freestyle libre flash glucose monitoring advice statement.

It is recommended that flash glucose monitoring with Freestyle Libre® is available for individuals with **diabetes who are actively engaged in the management of their diabetes and who intensively manage their condition with multiple daily insulin injections or insulin pump therapy**.

In keeping with the Scottish Diabetes Group criteria, use should be restricted to those who:

•Agree to attend a locally provided flash glucose monitoring education session;

•Agree to scan glucose levels no fewer than six times per day;

•Satisfy their clinical team that they (or carer) have the required knowledge/skills to self-manage diabetes; for example, having attended a recognised diabetes structured education programme.

Responsibilities of secondary care diabetes teams

- Assess patient's eligibility for the use of Freestyle Libre®, as per the SHTG guidelines. **diabetes who are actively engaged in the management of their diabetes and who intensively manage their condition with multiple daily insulin injections or insulin pump therapy**
- Discuss with people with diabetes the commitment required for trial and on-going supply of Freestyle Libre®.
- Advise patients to engage with an online education session about using freestyle libre
- Provide patient education sessions on Freestyle Libre® and education material, if patient cannot engage with the online sessions.
- Provide the person with a Freestyle Libre® meter and first sensor.
- Advise the patient's General Practitioner of the patient's eligibility for Freestyle Libre® and advising on issuing prescriptions for sensors and blood glucose test strips.
- Assess on-going eligibility for continued supply of Freestyle Libre®

Responsibility of the person established as being eligible for Freestyle Libre®

- Agree to attend a locally provided Flash Glucose Monitoring education session; and
- Agree to scan glucose levels no less than six times per day; and
- Agree to share glucose data with their diabetes clinic and complete any clinical and quality of life questionnaires.
- Aware that the continued availability will depend on on-going effective use of the technology to improve self-management.
- Aware that they will receive no more than 2 - 4 sensors at any one time and no more than 26 sensors per annum (unless there are exceptional circumstances).

Responsibilities of General Practitioners

- Do not prescribe Freestyle Libre® sensors for any patient unless they have been deemed as meeting the access criteria by the secondary care diabetes service, including patients who are currently "self funding" and correspondence has been received from the service.
- Refer any patient with diabetes who is not currently attending a hospital diabetes clinics, to the secondary care diabetes service (adult or paediatric) that are requesting to be considered for the Freestyle Libre®.
- Prescribe ongoing Freestyle Libre® sensors (recommended that no more than 2 - 4 sensors are provided at any one time and no more than 26 sensors per annum (unless there are exceptional circumstances)).
- Prescribe blood glucose test strips, as recommended by the secondary care diabetes teams which will still be required, such as when a person is unwell (scanned readings are at the extremes of glycaemia) or to meet the requirements of the Driver and Vehicle Licensing Agency in assessing fitness to drive.

Discontinuation Criteria any one of the following:

- Failure to achieve at least one of the criteria listed in the section above.
- Failure to attend follow up appointments.
- Failure to scan at least six times per day.
- Failure to share this data with their specialist team.
- Failure to engage with secondary care team to optimise issues with glycaemic control.
- Failure to use testing strips and sensors as recommended.
- Evidence of greater harm than benefit on clinical and psychological health (eg increased frequency of hypos, increased psychological morbidity).

Exceptional use over and above SHTG guidance, use in pregnancy, and all patients with CF related diabetes:

- The MCN will consider individual cases out with the above groups if felt to aid avoidance of acute complications of diabetes, in particular severe hypoglycaemia and DKA, in patients using non MDI insulin (eg bd mix).

Owner Diabetes MCN Dr Chris Smith Review date January 2024