National Institute for Health and Clinical Excellence

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# PRESS RELEASE

# NICE issues updated guidance on the use of insulin pump therapy

NICE has today (23 July 2008) published its final guidance on the use of continuous subcutaneous insulin infusion (CSII or 'insulin pump') therapy. This is a review of guidance on the use this technology published in February 2003.

For adults and children 12 years and older with type 1 diabetes, the guidance recommends insulin pump therapy as a treatment option provided that:

- attempts to reach target haemoglobin A1c (HbA1c) levels with multiple daily injections result in the person having 'disabling hypoglycaemia' [1] or
- HbA1c levels have remained high (8.5% or above) with multiple daily injections (including using long-acting insulin analogues if appropriate) despite the person and/or their carer carefully trying to manage their diabetes.

Insulin pump therapy should only be continued in adults and children 12 years and over if there has been a sustained improvement in the control of their blood glucose levels.

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[1] Hypoglycaemia means that treatment for diabetes can also cause blood glucose levels to become too low, causing the person to become anxious, dizzy or disoriented, have convulsions or become unconscious. 'Disabling hypoglycaemia' is when hypoglycaemic episodes occur frequently or without warning so that the person is constantly anxious about another episode occurring, which has a negative impact on their quality of life.

For children under 12 years with type 1 diabetes, the guidance recommends the use of Insulin pump therapy as a possible treatment if treatment with multiple daily injections is not practical or is not considered appropriate. Children who use insulin pump therapy should have a trial of multiple daily injections when they are between the age of 12 and 18 years.

Insulin pump therapy is not recommended for the treatment of people with type 2 diabetes.

Insulin pumps are small devices worn outside the body, which continuously deliver insulin into the body through a very thin tube or needle inserted under the skin. The insulin can be delivered at a set rate throughout the day, which can be increased when it's needed, for example, at meal times.

**Andrew Dillon, NICE Chief Executive, said:** "People with type 1 diabetes need daily injections of insulin to survive. One of the main drawbacks of conventional insulin regimens is the difficulty individuals can have in constantly achieving blood glucose control and balancing the risk of disabling hypoglycaemia, and hyperglycaemia [*too high a level of blood glucose*] - both of which can be potentially life-threatening. Today's guidance reaffirms NICE's original recommendations for the use of insulin pumps published in 2003. It means that people will continue to be able to access this important technology to achieve better blood glucose control, resulting in an improved quality of life and fewer situations where they need help from others."

The guidance is available (from 23 July) on the NICE website at

http://www.nice.org.uk/TA151

**Ends**

## Notes to Editors

### About NICE

1. The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.
2. NICE produces guidance in three areas of health:
    - **public health –** guidance on the promotion of good health and the prevention of ill health for those working in the NHS, local authorities and the wider public and voluntary sector
    - **health technologies –** guidance on the use of new and existing medicines, treatments and procedures within the NHS
    - **clinical practice –** guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS.