DEVICES



Pumps

CGM

G tube

Glucometers

Closed Loop

Glucometers

Are they accurate?

- standards set by the International Organization for Standardization
- Within ± 0.83 mmol/L of laboratory results at levels under 4.2 mmol/L
- Within ± 20% of laboratory results at levels over 4.2 mmol/L

What can affect readings:

Heat
Cold
Too little blood
Contamination

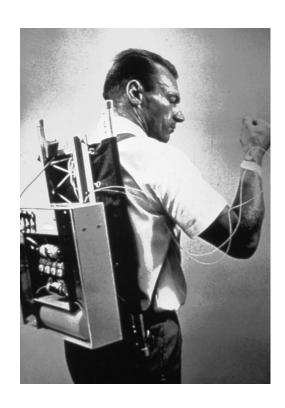


Where ?
Alternative sites





Insulin Pumps



- 1963 Dr Arnold Kadish
- Next pump in 1976
- NICE guidance endorsed first UK pump in 2003

Benefits to pumping insulin

- Quality of life
- Less injections
- fine tuning of BG levels
- Feel better
- Exercise made easier
- Sleepovers easier
- Micro managing insulin delivery



Different pumps

Medtronic

Animas

Accu Chek

Omnipod

Dana





- bolus wizards
- basal patterns
- sensitivity factors
 - tiny increments

www.inputdiabetes.org.uk

Continuous Glucose Monitors

Stand alone and integrated

Medtronic:

- Guardian Real Time
- Veo integrated

Animas:

Vibe integrated

Dexcom

Dexcom

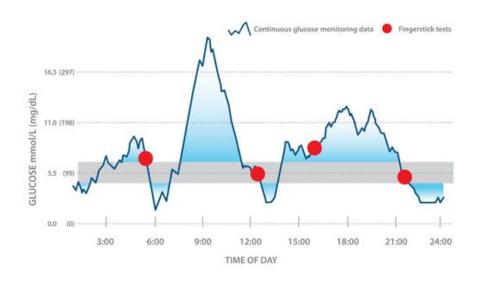
Abbotts

Navigator











Ipro:

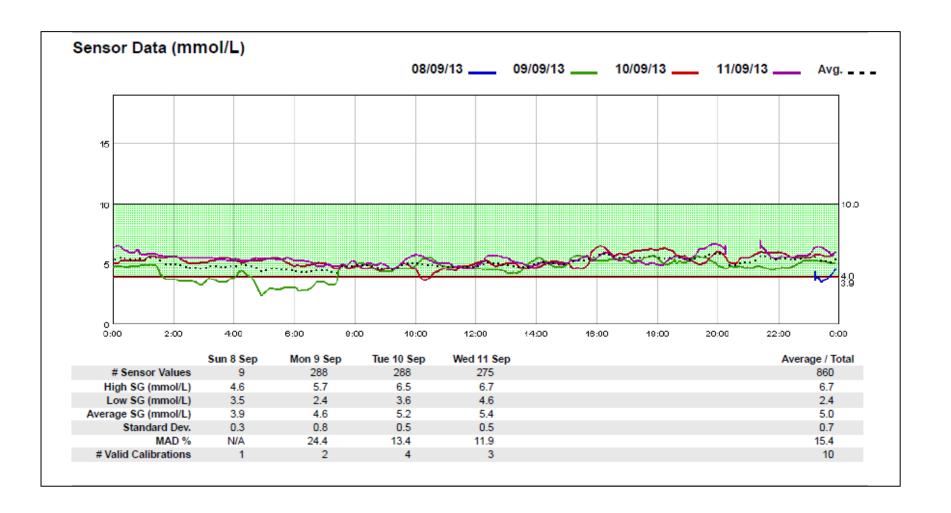
- blind sensor
- Investigate

Full time sensor use:

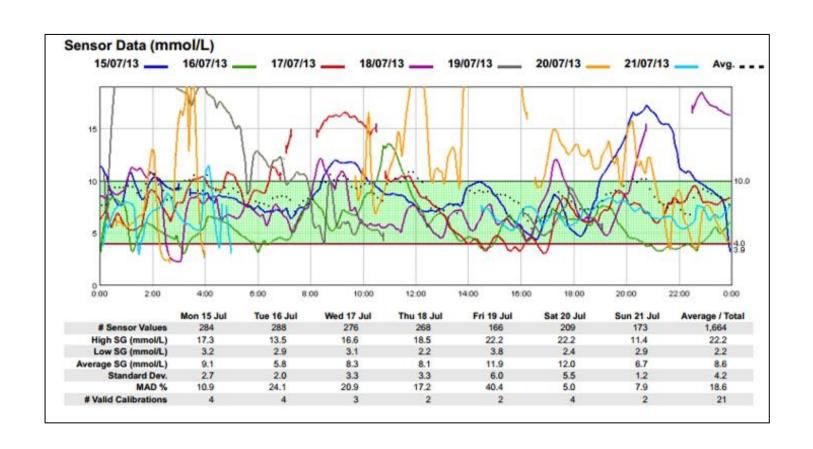
- Proactive and reactive
- Micro manage
- Tweaking



Me



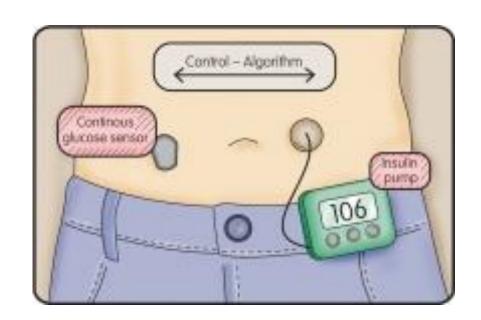
Not me!



Closing the loop!

The Artificial Pancreas

- Who ?
- Where ?
- When?



http://www.jdrf.org.uk

Just three things make an artificial pancreas

- 1. An insulin pump
- 2. A CGM continuous glucose monitor
- 3. An algorithm



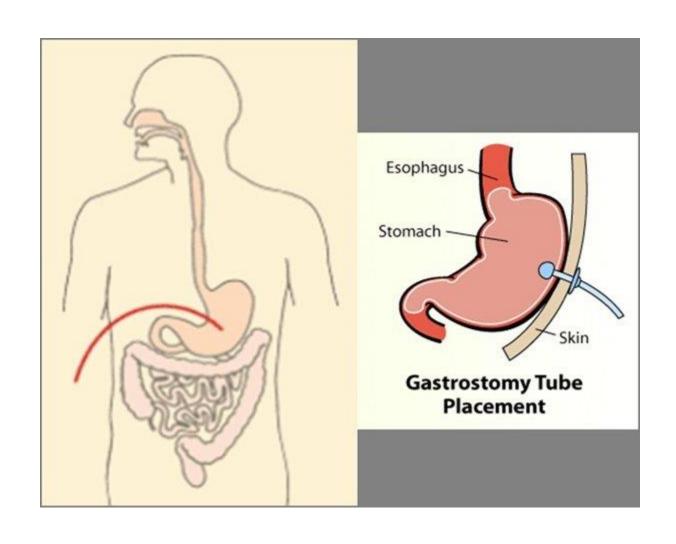
- What is an insulin pump?
- What is a continuous glucose monitor?
- What is an algorithm?

At the moment we are the algorithm

It is a sophisticated computer programme which makes decisions without human input

Trials are taking place but are top secret

What is a Gastrostomy?



Types of Gastrostomies.





These are the main types of devices used at GOSH:

	(tube or button)
 A flexible nobber tube (catheter) which is inserted through an inclaion in the abdomen. 	There are two types evaluation a gentrostomy total and a bestion or loss profile device.
 Unsully a temporary device for the first six to eight weeks, and is then replaced by a balloon device (see right). 	The tube can stay in place for about three months, and the button for about six months to one year
 Held in place using wide, flat wings inside the stomach, but may reed to be temporarily stitched to the skin. 	Both are held in place in the storacts using a small ladioon filled with water.
In must be secured with tape and the position tested before such fixed	 A feeding adapter may need to be attached for each feed, depending on the type of equipment used.
Removed by the clinical norse specialist. No surgery in necessary.	Removed by deflating the balloon.
0	8x
	Classify a temporary device for the first six to eight weeks, and is then replaced by a ballions device (see right). Held in place using wide, flat wings inside the someth, but may need to be temporarily stitched to the skin. It must be secured with tape and the position tested before each fixed. Removed by the clinical muse specialist. No surgery

Questions on Care Management?

