

Workshop 1 Interpreting Downloads

Geraldine Gallen

Type 1 Service Lead

Senior Diabetes Specialist Nurse

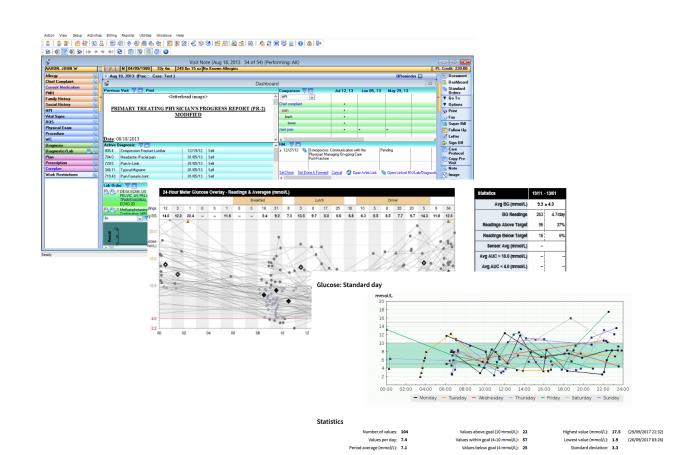
ABCD Diabetes Technology Network UK

Committee Member

King's College Hospital



NHS Foundation Trust



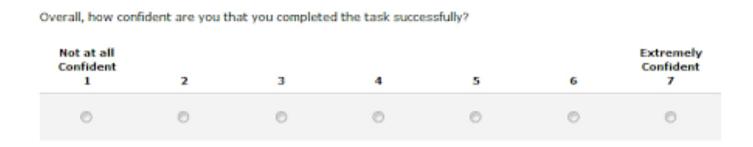
Self Assessment

HOW Selft aassessment



- How confident are you with reading/interpreting a download?
- Could you come to a hypothesis in 90 secs?
- How confident are you doing this across all technologies libre/CGM/CSII?

1 being not at all confident and 7 being extremely confident



After you have completed this session answer these questions again and see if your answers are different and whether your confidence changes.

Agenda

- ► Golden Rules of interpreting data
- ► High Value reports
- ▶ 90 Second Hypothesis

Which system should I use?

















Does this look familiar?

Interpreting the data can be challenging...

- Practice makes perfect
 - How not to drown in the download
- What are you trying to achieve:
 - Confidence to analyse own data
 - Improve self-management skills
 - More accurate decision making
 - Identify areas of hypoglycaemia
 - Reduce glucose variability
 - Increase level and quality of consultation with HCP/team working
 - Patient leading decision making



Key strategies

- Know what you are looking for
- Know where to find it
- Use high value reports leading to quick analysis

- Statistics
- Scan for patterns
 - Structural issues
 - Outliers
 - Problem areas
- Make a hypothesis
- Dive into data to confirm your hypothesis

Hypothesis in 90secs Verdict in 5 mins of seeing the download!

Golden Rule 1.

Structural vs Behavioural



STRUCTURAL ISSUES

- **✓** Incorrect settings
- **✓** Background Insulin
 - **✓** Overnight
 - ✓ Daytime
- **✓** Carbohydrate ratios
- **✓** Corrections
- **✓** Target levels

BEHAVIOURAL ISSUES

- ✓ Number of BG measurements
- ✓ Number of Quick Acting /boluses
- **√**Timing
- **✓** Over-rides
- ✓ Frequency of set changes
- ✓ Over-treatment of highs or lows

Don't change structural settings due to behavioural issues

Golden Rule 1. Structural vs Behavioural

Factors predicting success

Sensor usage [%] Measurements/ day at baseline 8-14 yrs 14-25 yrs >25 yrs

Beck et al; Diabetes Care 2009

structural changes that can easily gain some A1c reduction

Cannula and site issues (how often)

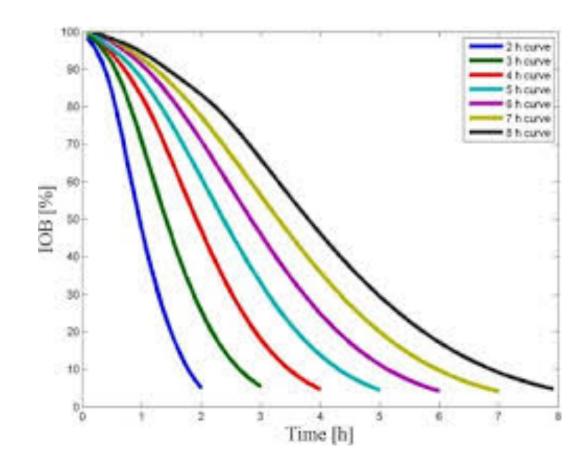
Calculations

- ► TDD what you would expect HbA1c/ Weight 0.5-0.8/kg/day
 - ▶ 0.5 x 40kg= 20units TDD
 - ▶ 0.8 x 40kg= 32units TDD
- ► Basal / bolus split (40-60%)
 - ► Low carbing (70 grams per day) =70% basal
 - ➤ Average carb intake (150-170 grams) = 50%/50%
 - ► High carbs (200 grams) = 70% bolus

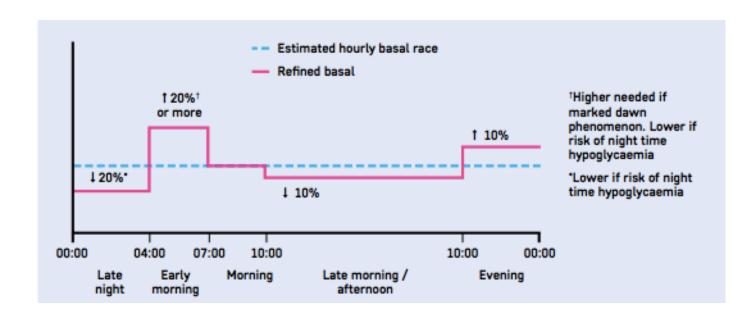
- Are the settings what you expect
- Consider re-calculating
- Aggressive bolus soft correction
- Aggressive bolus is relatively safer as it is buffered by food (CHO) intake.
- ▶ Most hypos are the result of correction bolus and hence a soft correction reduces this risk
- ► CHO ratio 350/TDD (instead of 500/TDD)
 - ► For example If TDD is 50 units
 - ➤ 350/50 = 7 grams carbs per 1 unit Insulin
- ► ISF 120/TDD
 - ► For example if TDD is 50 units
 - ► 120/50= 2.4mmol/l per 1 unit insulin



- ► Active insulin timing is based on bolus size
 - ▶ 1-4 units = 2.5 hours
 - ▶ 4-10 units = 3.5 to 4 hours
 - >10 units -4.5 5 hours. (Also for CKD)



Shape of basal profile



- Basic shape of profile
- Does it match physiology of insulin?

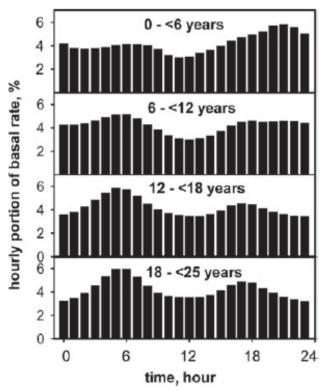
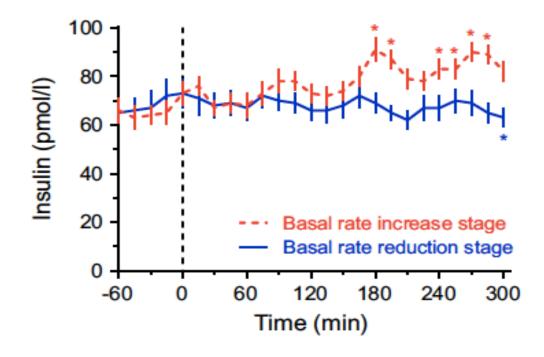


Fig. 1. Circadian distribution of basal insulin in four age groups (% of daily insulin requirement).

The impact of basal rate changes



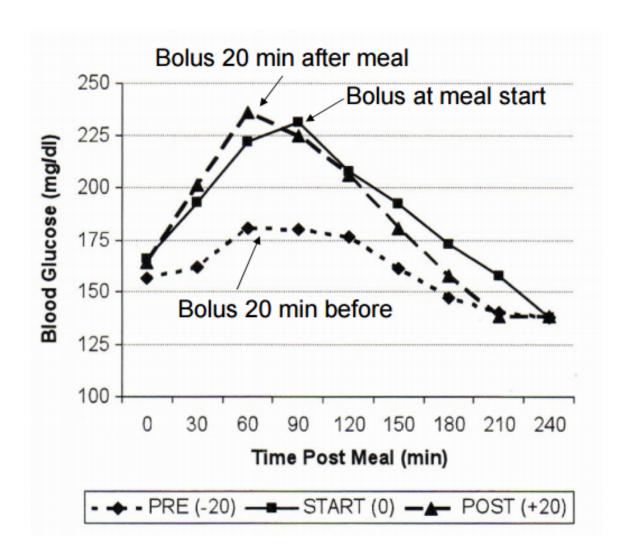
5URE 1 Impact of 0.2-unit/h basal rate change at 0 min on culating free insulin levels. Profiles by study stage. Values are mean SE. *P < 0.05 vs baseline.

- Use of a bolus calculator (smart meter)
- Correct targets on a bolus calculator –
 5.5 mmol/l
- Fine tuning corrections whilst keeping safe



Golden Rules 3. Value for blood

- The concept of obtaining maximum benefits for BG measurements/flashes
- Timing is everything...
 Bolus 20 minutes before meals

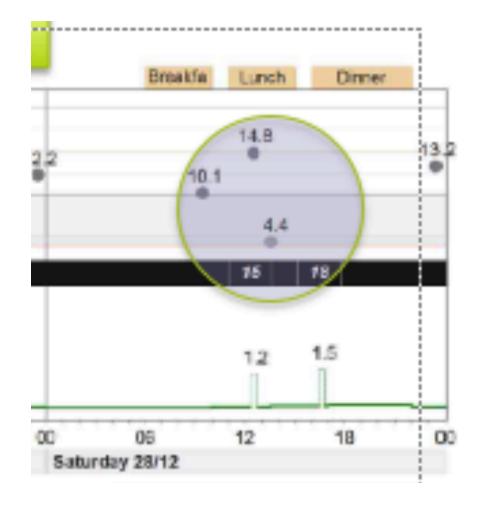


Golden Rule 4

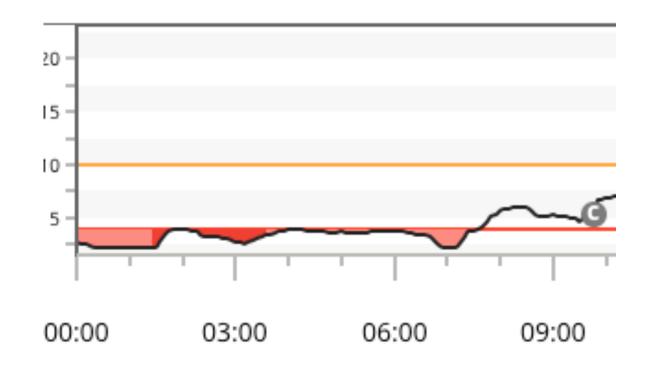
≥45° degree rise or fall in a data

≥45° degree rise: Carbs without insulin

≥45° degree fall: Insulin without carbs = Correction bolus at peak glucose



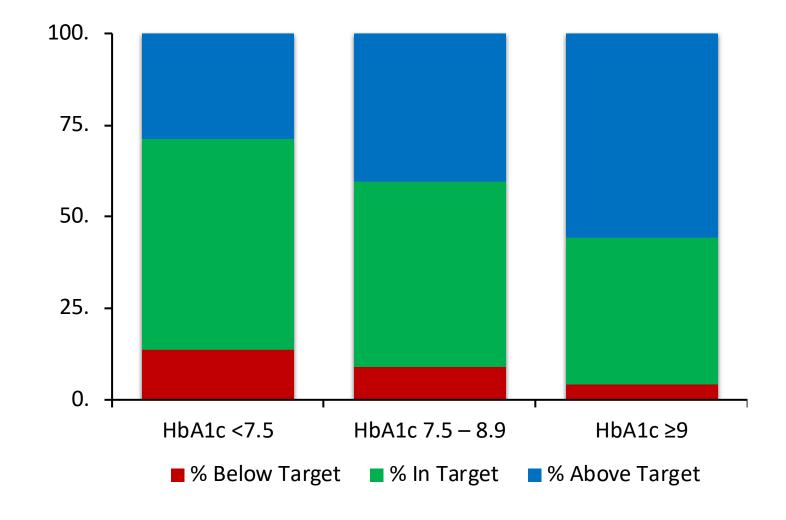
Golden Rule 5. False HbA1c due to hypos

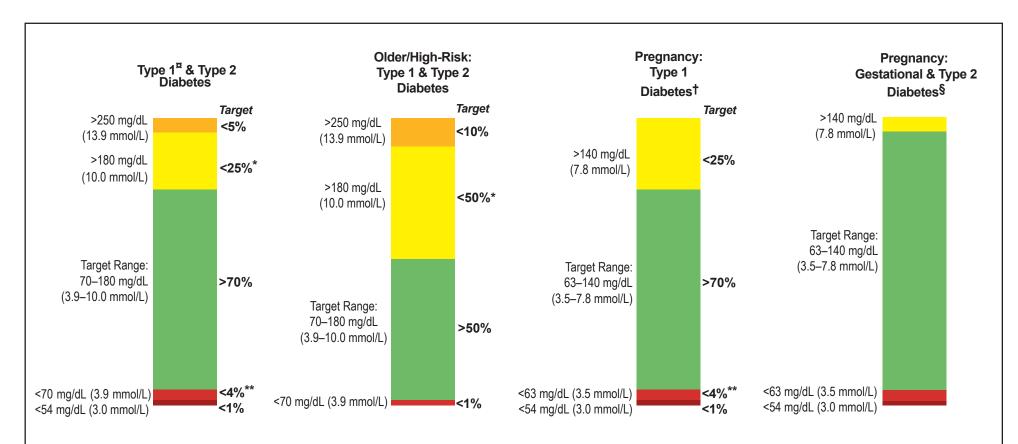


Golden Rules 6. TIR

- Explain what 70% TIR means to the person with T1D
- 30% time out of range = ~ 1/3 of readings or about 8 hours in a day out of range
- 3 out of your 5/day within 4-10

Figure 1: Proportion of daily CBG results above, below and within the target range amongst the varying HbA_{1c} groups.





[¤] For age <25 yr., if the A1C goal is 7.5%, then set TIR target to approximately 60%. (See Clinical Applications of Time in Ranges section in the text for additional information regarding target goal setting in pediatric management.)

[†] Percentages of time in ranges are based on limited evidence. More research is needed.

[§] Percentages of time in ranges have not been included because there is very limited evidence in this area. More research is needed. Please see Pregnancy section in text for more considerations on targets for these groups.

^{*} Includes percentage of values >250 mg/dL (13.9 mmol/L).

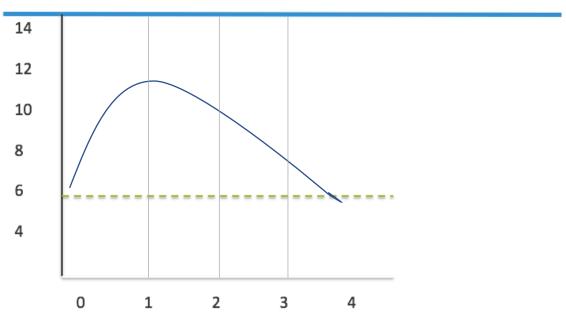
^{**} Includes percentage of values <54 mg/dL (3.0 mmol/L).

Golden Rule 7

1-2-3 Rule for post meal glucose

- ▶1-hour glucose: A reflection of timing of insulin
- ▶2- hour glucose: A reflection of adequacy of bolus did I give enough/too much?
- ▶ 3-hour glucose: A reflection of fat, protein, stress, activity etc.

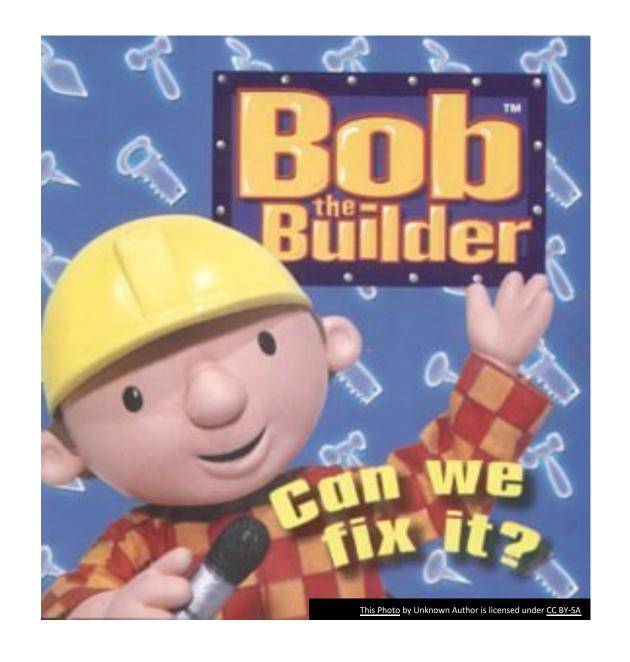




Golden Rule 8

If it isn't broken don't fix it

Know when not to stick to a rule
If the structure works for the patient and is not causing any distress to do not mess with it.



Rapid systematic analysis of pump download- Checklist

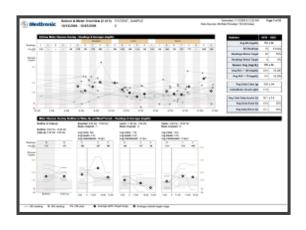
- SMBG/day vs Boluses/day:
 - SMBG >> Boluses ?anxious
 - Boluses >> SMBG ?snacking
- Set changes
- Suspend durations
- TDD
 - Calculate predicted Carb Ratio, ISF and basal rates from TDD
- basal bolus split
 - Average carbs entered
- Average BG (7.5-8.5mmol/l)
- Generate hypothesis for the dysglycaemia
- Ask a specific question and review SMBG/CGM data to prove or disprove hypothesis
- Make a structural change if needed. If it isn't broken do not fix it!

High Value Reports – 90 sec analysis

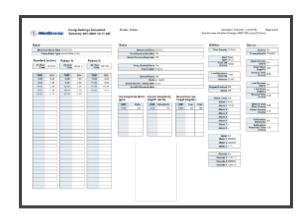
Adherence

| Page |

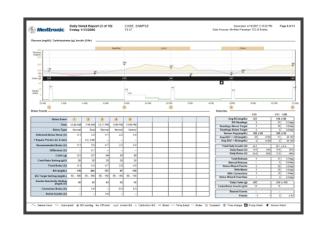
Sensor & Meter Overview



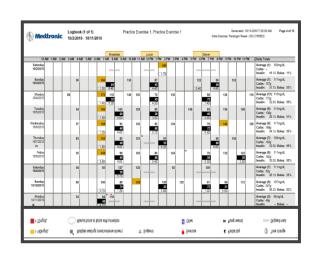
Device Settings



Daily Detail



Logbook



Information

		BG Readings	Sensor Duration (d:hh:mm)	Manua Boluce		With Food	With Correction	Overridden	Rewind	Fixed Primes	Fixed Prime Volume (U)	Manual Primes	Manu Prim Volume	- 11	Suspend Duration (h:mm)
	Tuesday 18/03/2008	6	24:00		3	3	3	3							0:02
	Wednesday 19/03/2008	6	21:05		3	3	3	3							0:15
0	Thursday 20/03/2008		0:15												
0	Friday 21/03/2008	4			3	3			1			1	3.1		
	8aturday 22/03/2008	7	19:15		3	3									0:11
	8 unday 23/03/2008	5	24:00		3	3	1					1	0.5		0:15
	Monday 24/03/2008	8	24:00		5	5	3	1							
	Tuesday 25/03/2008	5	24:00		3	3	2								
	Wednesday 26/03/2008	7	24:00		5	5	3	2							0:15
	Thursday 27/03/2008	3			3	3						1	0.9		
	Friday 28/03/2008	4			4	4									0:30
	8aturday 29/03/2008	7		1	3	3									0:05
	8 unday 30/03/2008	6		1	3	3									0:05
	Monday 31/03/2008	5			3	3	1					1	0.9		
	Summary	5.8/day	6d 16h 35m	0.2/da	/ 3.4/day	100.0%	39.0%	22.0%	1	0	-	4	0.8U/pr	me	1:38

19/11	- 13/01
9.3	± 4.3
263	4.7/day
96	37%
16	6%
-	
-	
198	± 43
13.1	
29.1	± 3.6
14.0	48%
15.1	52%
	9.3 263 96 16 - - 198 13.1 29.1

Use of Virtual Clinic after CSII start

- ▶ 26 year old, Type 1 diabetes
- ► Tertiary referral, 4-5 hrs round trip
- travels with work
- ► High HbA1c 8.9% (74mmol/mol)
- ► TDD 80 units
- Omnipod
- ► What reports?
- Compilation page
- Settings
- Dive into data (day to day/ logbook)

Use of Virtual Clinic after CSII start

Compilation

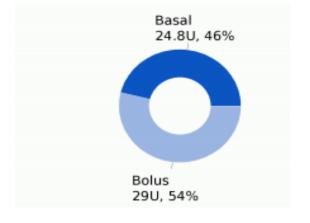
Glucose	CGM	Insulin	Carbs	Acti	vity
Average	Average	Average daily dose	Average carbs (Avg steps / day	Avg kcal / day
7.1	9.4	53.8 U	152 g	0	0
mmol/L	mmol/L	U)		steps	kcal
SD = 3.3 # = 104	SD = 3.8 # = 1297	SD = 14 # days = 14	SD = 48 # = 54	0% of 10000 (target)	0% of 2500 (target)
Avg # / day = 7.4	Avg # / day = 92.6	Avg # bolus doses/day	Avg # / day = 3.9		
		= 6.1			

Insulin

Insulin doses summary	
Average daily insulin (U)	53.8
Standard deviation (SD)	14.2
Average daily basal (U)	24.8
Average daily bolus (U)	29
Average bolus doses/day	6.1
Average days between cannula fills	
Average days between primes	

Carb summary	
Avg # carbs/day	152 g
Standard deviation (SD)	48

Bolus calculation summary	
Avg # Normal Boluses/day	4.4 (73%)
Bolus overrides/total boluses	0%
Avg # bolus overrides/day	0



Values below goal (4 mmol/L)	96
Average daily CGM sensor duration	23:15 (97%)
Total CGM sensor duration	13 days
	12:15

Settings

Insulin: Pump settings

Insulin pump settings for serial number: 130279144 (OmniPod). Upload date: 03/10/2017 08:15 (Europe/London)

Bolus

Setting	Value
Suggestion bolus	Enabled
Bolus Reminder Options	enable Disabled
Max Bolus	30 U
Extended	%

Basal

Setting	Value
Max Basal	2.5 U/h
Temp basal mode	96
Active basal program	1

General

Setting	Value
Min BG for calcs	3.9 mmol/L
BG goal low	4 mmol/L
BG goal high	10 mmol/L
Insulin action	240 min
Reverse correction	Enabled
Low reservoir leve	l 50.0 U
BG reminder	Disabled
Pod expiration	360 min
Auto-off alarm	Disabled
Reminder alerts	Enabled
Confidence alerts	Enabled
BG unit	mmol/L
BG sound	Enabled
Bolus increment	0.05 U
Language	English

TDD 53.8 units

Basal = 1.1 units/hr

CHO = 6.5grams

ISF = 2.4 units

I:C ratio settings

	Start	1 U: [g]
1	00:00:00	7
2	05:30:00	6
3	11:30:00	7

ISF programs

	Start	ISF [mmol/L]
1	00:00:00	2.1

BG target range settings

	Start	Target [mmol/L]	Threshold [mmol/L]
1	00:00:00	6.5	6.5
2	06:30:00	5.5	5.5
3	22:00:00	6.5	6.5

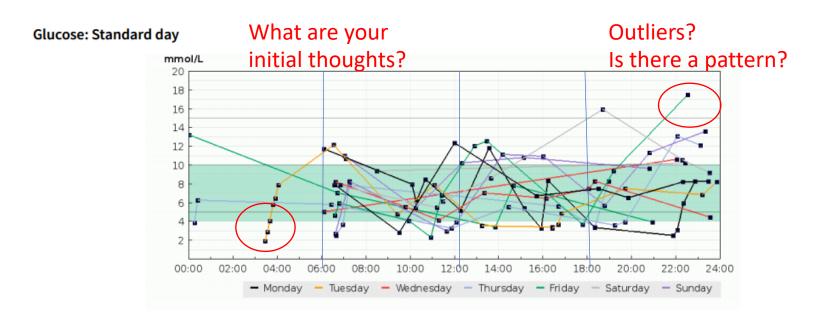
Basal profiles

Program: 1

	Start	Rate
1	00:00:00	0.900
2	06:00:00	1.000

Sum: 23.400 U

Use of Virtual Clinic after CSII start



Statistics

Number of values: 104

Values per day: 7.4

Period average (mmol/L): 7.1

Values above goal (10 mmol/L): 22
Values within goal (4-10 mmol/L): 57
Values below goal (4 mmol/L): 25

Highest value (mmol/L): **17.5** (29/09/2017 22:32) Lowest value (mmol/L): **1.9** (26/09/2017 03:26)

Standard deviation: 3.3

Dive into the data to confirm your hypothesis

Comparison: Day by day overview

