A ZSFG Diabetes e-Newsletter

The Point September 2019

Making diabetes care better, less frustrating and more fun since 2008



SPECIAL SEPTEMBER EDITION (part 2 of 2)

- > Free DPP classes. REFER NOW!
- > Guidance around Freestyle Libre

Diabetes Resources in SharePoint

Diabetes Prevention Program RECRUITMENT -- NOW!

Another round of **Diabetes Prevention Program classes** is starting in **October!** It's a great time to encourage your patient to take advantage of this free program available in English, Spanish and Cantonese at various locations. Online/mobile DPP is available in English and Spanish.

(**Note: Our Cantonese class starting October 19 on Saturdays from 11a-12p at Chinatown YMCA may be cancelled if we are unable to reach a minimum number of participates. Please refer!!)

Qualified SFHN patients are over 18 yo, overweight, at high risk for developing diabetes, and are willing to commit to a year-long program to support meaningful lifestyle changes that can cut their risk for developing diabetes in half.

Patients who are actively participating in a DPP can access a free YMCA gym membership.

Submit an eConsult through Epic to Diabetes Prevention Services or have your patient self refer by calling our DPP Patient Navigator Rebeca Garcia at 628-206-6381. For guestions, contact Audrey Tang, NP, at audrey.tang@sfdph.org.

Feel free to distribute and/or post the following flyers: English, Spanish, Chinese + October class dates for all languages

GUIDANCE AROUND FREESTYLE LIBRE

You may have seen some of your patients referred to ZSFG Diabetes Clinic started on the **Freestyle Libre**, a **continuous glucose monitoring (CGM) system**. Diabetes Clinic providers/RNs are trained on using CGM, getting patients started, downloading the data, and interpreting the data to help patients make actionable changes. As we have gained



more experience with this technology and learned how to navigate insurance hurdles, we'd like to share some thoughts on identifying appropriate candidates and setting reasonable expectations.

First, what is CGM?

There are 3 brands currently available in the U.S. All CGMs involve a sensor filament that is placed in SQ tissue which measures glucose in the interstitial space and wirelessly communicates sensor glucose levels to a hand-held reader. In the case of the Freestyle Libre, the sensor is a waterproof, round flat disk that adheres to the back of the arm for 14 days. The sensor measures and records the glucose level, but the wearer must actively "scan" the sensor in order to see the current glucose level on the reader screen. With each scan, the current sensor glucose is shown in the context of the past 8 hr glucose trends as well as with an arrow predicting whether the glucose is stable, falling or rising over the next hour.

Why would someone want CGM?

Fingerstick checks represent a static BG at a single point in time. We all know that BGs fluctuate depending on insulin dosing and other medications, food, exercise, stress, etc. Checking intensively even 4x/day only shows 4 discrete time points in a 24 hr period and may miss periods of hyper- or hypoglycemia. In the case of the Freestyle Libre, the sensor is checking a sensor glucose every 15 minutes and can provide a continuous tracing of the sensor glucose ups and downs. One apt analogy--having CGM is like seeing the full-color movie vs. fingersticks is just seeing a few still images from the movie.

Who is an appropriate candidate?

CGM is most helpful for people with T1DM or T2DM on basal-bolus insulin regimens who are willing to make changes in response to the glucose readings. With frequent scanning, the wearer can see the effect of prandial insulin dosing relative to what was eaten, the effect of correcting for a high sugar, the effect of exercise, and how basal insulin affects the overnight period. When we download aggregate data in clinic, it is also easier to spot trends and identify hyper- and hypoglycemic episodes and make recommendations to adjust insulin doses or diet.

- <u>SFHP medi-cal</u> will consider Freestyle Libre via PA (pharmacy benefit) for T1DM or T2DM on insulin, documented need to check BG > 4x/day and contraindication or barrier to doing fingersticks
- <u>Medicare</u> criteria strictly requires insulin injections >= 3x/day and documented BG checks >= 4x/day. If covered, supplies are shipped through a DME supplier
- <u>HSF</u> does not cover Freestyle Libre

What are reasonable expectations for CGM?

The wearer must be willing to wear the sensor and scan their glucose--for those on intensive basal-bolus insulin regimens, this typically translates into wake-up/breakfast, before lunch, before dinner and at bedtime. Of course, scanning additionally between meals or overnight may be helpful for some. Also, the wearer must actively scan to see the glucose; with the Freestyle Libre there are <u>no</u> <u>alarms</u> for high or low BGs unlike other CGMs. If more than 8 hrs elapses between scans, older glucose data is not saved and is thus lost.

Please contact us if you have other questions! We are happy to provide more training for nurses, providers, etc.