

PRESS RELEASE

New guideline for the NHS on the diagnosis and management of type 1 diabetes in adults

A new guideline published today by the National Institute for Clinical Excellence (NICE) and the National Collaborating Centre for Chronic Conditions (NCCCC) sets out how health professionals should manage the treatment and care of adults with type 1 diabetes. The guideline will ensure that the NHS is working to the same standards when supporting people with diabetes across England and Wales.

The new guideline makes clear that care should be patient-centred and the views and preferences of individuals with type 1 diabetes should be integrated into their healthcare. Diabetes services should be organised, and staff trained, to allow and encourage this.

Other key recommendations made in the guideline include:

- Care should be provided by a multidisciplinary team. Such a team should include members having specific training and interest to cover: education/information giving; nutrition; therapeutics; identification and management of complications; foot care; counselling; and psychological care.
- Culturally appropriate education should be offered after diagnosis to all adults with type 1 diabetes (and to those with significant input into the diabetes care of others). It should be repeated as requested and according to annual review of need. This should encompass the necessary understanding, motivation and skills to manage appropriately:
 - blood glucose control (insulin, self-monitoring, nutrition)
 - arterial risk factors (blood lipids, blood pressure, smoking)
 - late complications (feet, kidneys, eyes, heart).

- Blood glucose control should be optimised towards attaining DCCT-harmonised HbA1c targets for prevention of microvascular disease (less than 7.5%) and, in those at increased risk, arterial disease (less than or equal to 6.5%) as appropriate, while taking into account:
 - the experiences and preferences of the insulin user, in order to avoid hypoglycaemia
 - the necessity to seek advice from professionals knowledgeable about the range of available meal-time and basal insulins and about optimal combinations thereof, and their optimal use.

- Adults with type 1 diabetes should be assessed for arterial risk at annual intervals. Those found to be at increased risk should be managed through appropriate interventions and regular review. Note should be taken of:
 - microalbuminuria, in particular
 - the presence of features of the metabolic syndrome
 - conventional risk factors (family history, abnormal lipid profile, raised blood pressure, smoking).

- Adults with type 1 diabetes should be assessed for early markers and features of eye, kidney, nerve, foot and arterial damage at annual intervals. According to assessed need, they should be offered appropriate interventions and/or referral in order to reduce the progression of such late complications into adverse health outcomes affecting quality of life.

Professor Philip Home, Professor of Diabetes Medicine at the University of Newcastle and clinical advisor to the Guideline Development Group stated: "Type 1 diabetes may seem to be all painful injections, blindness, and lifestyle restriction. But it does not have to be that way. These guidelines set a direction that encourages people with diabetes and the professional teams that advise them to discuss and agree how they use the technological advances of the last decade to live a close to normal life, while avoiding the devastating late-developing complications. Diabetes management is about self-management. The guideline espouses the need for full education about diabetes and how to handle it. It also emphasizes preventative screening and therapy, so avoiding future health problems, rather than needing more intensive and costly salvage medicine. Thus these guidelines are a subtle marriage within the NHS of structured care with individual choice."

Dr Roger Gadsby, GP member of the Guideline Development Group stated: "This guideline is of great importance to all adults living with type 1 diabetes, and those working in the community helping to care for them. This publication gives a comprehensive synthesis of the available evidence, and gives many important recommendations for management. It stresses the need for patient-centered care, delivered by a multi-disciplinary team. The care of people with type 1 diabetes has in the past been largely in secondary care. Today more and more people are receiving part, or in some cases, all of their routine care in the community. This guideline will inform, guide and help all who are helping to care for adults with type 1 diabetes".

David Turner, patient member of the Guideline Development Group stated: "This guideline on the management of type 1 diabetes in adults recommends good practice for doctors, nurses and others working in the NHS. It covers the full range of care which should be available to adults with type 1 diabetes. The recommendations contained in this Guideline are based on sound evidence. As the lay representative in the team developing this Guideline, with 17 years experience of type 1 diabetes, I feel certain that it will inform people of the optimal methods to self-manage their diabetes. It will also be very useful for those important people caring for adults with type 1 diabetes."

Bridget Turner, Head of Health Policy and Development at Diabetes UK, stated: "These guidelines provide an excellent benchmark for diabetes care in the UK and the cornerstone of good diabetes provision for all. The recommendations cover important issues for adults and children such as diagnosis, management, education, complications and screening, all of which, if implemented, will ensure that consistent, quality care is delivered."

Professor Peter Littlejohns, Clinical Director of NICE and Executive Lead stated: "I would like to thank the National Collaborating Centre for Chronic Conditions and the Guideline Development Group for all their hard work on this important guideline. This guideline is based on the best available evidence and has been developed following a collaborative and consultative approach involving health professionals and people with diabetes. These guidelines should help standardise best practice in the field of diabetes care."

NICE has also launched a clinical guideline on the treatment and care of children with type 1 diabetes today, and further information can be found on the NICE website at www.nice.org.uk.

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Notes to Editors

About NICE

1. NICE is part of the NHS. It is the independent organisation responsible for providing national guidance on treatments and care for those using the NHS in England and Wales. Its guidance is for healthcare professionals and patients and their carers to help them make decisions about treatment and healthcare. For further information about NICE you can visit www.nice.org.uk.
2. NICE produces guidance in three areas of health:
 - the use of new and existing medicines and treatments within the NHS in England and Wales – technology appraisals.
 - the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales – clinical guidelines.
 - whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use – interventional procedures.

NICE also funds three enquiries that undertake research into the way patients are treated to identify ways of improving the quality of care (the investigations are known as confidential enquiries).
3. NICE guidance and recommendations are prepared by independent groups that include professionals working in the NHS and people who are familiar with the issues affecting patients and carers.

About clinical guidelines

4. Clinical guidelines are recommendations on the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales. They sit alongside, but do not replace, the knowledge and skills of experienced health professionals.
5. Our clinical guidelines are developed by independent groups that include healthcare professionals working in the NHS, patients and people who are familiar with the issues affecting patients and carers. Professional and patient/carer groups whose members are likely to be affected by the guideline are able to submit information and comment on the recommendations before they are finalised.
6. The guideline on Type 1 diabetes in children was developed by the National Collaborating Centre for Chronic Conditions which is based at the Royal College of Physicians and involves the following partners:
 - Royal College of Physicians
 - Clinical Effectiveness Forum for Allied Health Professionals
 - Royal College of Surgeons
 - College of Health
 - Royal College of General Practitioners
 - NHS Confederation
 - RCP Patient & Carer Liaison Committee
 - Royal Pharmaceutical Society
 - Royal College of Nursing

About Diabetes UK

8. Diabetes UK is the charity for people with diabetes. Diabetes UK funds medical research, provides information and support to people with diabetes and campaigns on their behalf. For more information visit www.diabetes.org.uk or telephone 020 7424 1000.