

Interim South East London (SEL) Insulin degludec (Tresiba[®]) 100 units/ml, 200units/ml FlexTouch[®] pen or 100units/ml Penfill[®] cartridge for TYPE 1 DIABETES MELLITUS – information sheet

This interim information sheet is for use during the current COVID-19 pandemic and temporarily replaces the need for specialist teams to complete an insulin degludec (Tresiba[®]) transfer of care form

This information sheet should be read in conjunction with the specialist diabetes team clinic letter to support practices in taking over prescribing responsibility for insulin degludec (Tresiba[®]), 3 months after initiation and ensure patient care is not compromised. If insulin degludec (Tresiba[®]) is prescribed for patients/indications that do not meet the agreed criteria, prescribing responsibility will remain with the initiating team. For Children with type 2 diabetes initiated on insulin degludec (Tresiba[®]), prescribing will remain under the diabetes specialist team - prescribing will not be transferred to primary care.

South East London insulin degludec (Tresiba[®]) eligibility criteria

In line with SEL guidance, insulin degludec (Tresiba[®]) will be initiated by a diabetes specialist (Consultant or GPwSI) and prescribed for adults and children over 1 year with type 1 diabetes when:

- Both insulin detemir and insulin glargine have been tried and the patient still has poorly controlled diabetes **AND**
- The next step would otherwise be an insulin pump **AND**
- Psychosocial or other factors indicate the need for longer duration insulin to facilitate continued treatment and avoid decompensation due to the mismanagement of insulin **AND**
- Patient has had frequent emergency hospital admissions attributed to poorly controlled diabetes

Additionally, specifically for adolescents:

- There has been multi-disciplinary team input (including psychology, nursing and a medical review) and elective admission for education and training and there is still evidence of poor adherence to insulin therapy which has resulted in poor diabetes control including:
 - High HBA1c (indicated by several readings >9%) **OR**
 - Admission to hospital with diabetic ketoacidosis (DKA) **OR**
 - The development of co-morbidities including neuropathy or retinopathy

Insulin degludec (Tresiba[®]) will NOT be prescribed for:

- People with:
 - Hypersensitivity to the active substance or to any of the excipients
 - Contra-indications to use

People (and their carers where relevant) started on Tresiba[®] (insulin degludec) will have been given the following advice by the initiating team:

The initiating team will have ensured that the patient/carer is aware / has been informed:

- Of the benefits and risks of insulin degludec (Tresiba[®]) therapy and has consented to use
- To always check the insulin label before each injection to avoid accidental mix-ups between insulin degludec (Tresiba[®]) and other insulin products or between differing strengths of insulin degludec
- To always visually verify the dialled units on the dose counter of the pen. (Patients who are blind or have poor vision or are unable to 'dial up' and visually verify the dose must be instructed to always get help/assistance from another person who has good vision and is trained in using the insulin device)
- Of specific education and training in administration of insulin degludec (Tresiba[®]) via FlexTouch[®] pen or Penfill[®] cartridge as applicable
- Patient/carer is aware of the dose in units that they need to administer
- That the first 3 months of treatment will be prescribed **and** supplied by the hospital pharmacy. They should not take their prescription to their GP practice until after this 3 month period.

Important information for GP practices

- Please prescribe all insulin by **BRAND** name
- Insulin degludec (Tresiba®) is an ultra-long acting basal insulin. Please ensure that the patient is not prescribed any other ultra-long or long-acting insulin. If you are unsure which insulin should be prescribed, check with the patient and/or the initiating team and/or the insulin passport (where available), as relevant
- Please ensure you include the correct strength of insulin degludec (Tresiba®) on the prescription as insulin degludec (Tresiba®) is available in two strengths, 100units/ml and 200units/ml:
 - **insulin degludec (Tresiba®) 100 units/ml is available in:**
 - 3ml cartridge (Penfill®)
 - 3ml pre-filled pen (FlexTouch® pen)*
 - **insulin degludec (Tresiba®) 200 units/ml is available in:**
 - 3ml pre-filled pen (FlexTouch® pen)*

* Important note: The dose steps differ between the two strengths of insulin degludec (Tresiba®) FlexTouch® pens:

- **Insulin degludec (Tresiba®) 100 units/ml FlexTouch® Pen:** a dose of 1 – 80 units per injection in steps of 1 unit can be administered
- **Insulin degludec (Tresiba®) 200 units/ml FlexTouch® Pen:** a dose of 2 – 160 units per injection in steps of 2 units can be administered

The specialist team will advise on the correct strength and device to prescribe of insulin degludec (Tresiba®). If there are any queries or doubt, please contact the initiating team for advice.

Dosing recommendations

Inject the required number of units once daily by subcutaneous injection.

The dose (in units) will have been advised by the specialist team. Note that dose (in units) may vary and the actual dose should not be labelled on insulin when dispensed as this may change.

Monitoring requirements - bloods

The specialist team will have undertaken relevant bloods prior to transfer of prescribing wherever possible. We would recommend that HbA1c is monitored 3 monthly. Patients will also be measuring glucose levels at home.

Routine bloods will also be required e.g. in line with the National Diabetes Audit, NICE guidance. Some patients may need more frequent monitoring based on patient factors e.g. baseline eGFR/creatinine, eGFR/creatinine trend, co-morbidities and prescribing of other medication.

Monitoring effectiveness

A routine follow up appointment will be booked with the specialist team where therapy will be reviewed on an ongoing basis. If you have any concerns or questions relating to therapy, please contact or refer back to initiating team for review.

Accessing further information

More information including information on licensed indications and drug interactions can be found on the relevant summary of product characteristics at www.medicines.org.uk For further information, please seek advice from the initiating team.

In the event that there are any concerns regarding the acceptance of the prescribing responsibility for this medication please contact the initiating team.

This guidance does NOT override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

References 1. South East London Area Prescribing Committee Formulary Recommendation number 059. Date of issue: January 2017, available [here](#). 2. Novo Nordisk "Tresiba 100 units/mL Cartridge (Penfill)" and "Tresiba 100 units/mL, 200 units/ml Pre-filled pen (Flextouch)" Summary of Product Characteristics and risk minimisation materials at <http://www.medicines.org.uk> 30/03/20; last updated on the eMC: 21/11/18