



NICE to know...



The facts you need to make the most of your diabetes care.



NICE to know...

The National Institute for Health and Care Excellence (NICE) provides advice on the care and support that should be offered to people who use health and care services in the UK.¹

Why it matters to you

NICE guidelines reflect the **rights and responsibilities** of patients and healthcare professionals, and make evidence-based recommendations on health topics, including diabetes.

Contained inside are a few elements from the NICE diabetes guidelines that you should know about...^{2, 3}



Be part of decision making

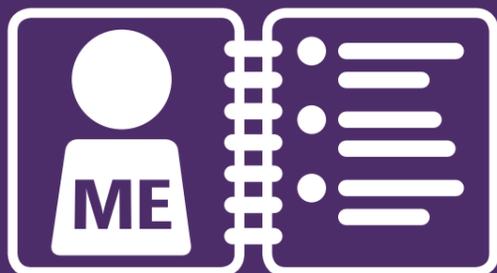
Talk to your healthcare team to find out if self-monitoring could help you.



Having a blood glucose meter that fits your needs, lifestyle and preferences is something you should be able to discuss with your healthcare team. This is especially important if you need to improve your blood glucose control.



You should have the opportunity to make **informed decisions** about your care and treatment, in partnership with your **healthcare team**.



You should be supported with an **individualised care plan** that takes into account your needs and preferences.

Ask about **structured education programmes** that are available to help you manage your diabetes.

Talk to your healthcare team.

Your HbA1c target should be jointly agreed with your healthcare team, taking into consideration your daily activities, aspirations, risk of complications, occupation and other health conditions.



Your **HbA1c** should be measured every **3-6 months** and you should be informed of your results after each measurement.

GET TESTING... FOR THE RIGHT REASONS!

For adults with Type 1 diabetes²

Test your blood glucose at least

4 times a day

BEFORE EACH MEAL

AND

BEFORE YOU GO TO BED.

(For children and young adults, **at least 5 times a day**.)

You may need to test up to 10 times a day or more depending on your daily activities and your lifestyle. Tell your healthcare team if you are:

Having problems meeting your personal HbA1c target

Taking part in sport, exercise or other physical activity

Starting to experience hypos more frequently

Ill or feel unwell

Driving a vehicle

Unable to sense you are having a hypo

Planning a pregnancy, pregnant or breastfeeding

Taking part in 'high-risk' activities, travel or occupations

For adults with Type 2 diabetes³

Routine self-monitoring is only recommended if you are:

On insulin

Experiencing hypos

On oral medicines that increase your risk of hypos

Pregnant or planning a pregnancy

If you drive a vehicle you need to be particularly aware of the DVLA requirements that may apply to you, and you should discuss this with your healthcare team

Short-term self-monitoring may be necessary if you start treatment with medicines called corticosteroids, or to help your healthcare team confirm suspected hypos

NICE guidelines also include details about other aspects of diabetes care including dietary advice, drug treatments and blood pressure management.

NICE has also published guidelines specifically for Diabetes (type 1 and type 2) in children and young people, and for Diabetes in pregnancy.

For more information visit
www.nice.org.uk

References:

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1. National Institute for Health and Care Guidance (2016) 'About'. Available from: www.nice.org.uk/about
2. National Institute for Health and Care Guidance (Published date: August 2015 Last updated: July 2016)
'Type 1 diabetes in adults: diagnosis and management' Guideline NG17. Available from: www.nice.org.uk/guidance/ng17
3. National Institute for Health and Care Guidance (Published date: December 2015 Last updated: July 2016)
'Type 2 diabetes in adults: management' Guideline NG28. Available from: www.nice.org.uk/guidance/NG28

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