Diabetic Test Strip Prescribing Guidance

Ipswich and East Suffolk CCG supports GPs to prescribe testing strips for diabetes responsibly in a safe and cost effective manner. This guidance provides support on prescribing quantity and indication.

**Type 1 diabetes**

Should be prescribed **no more than 3 boxes per month** based on testing 4 times per day, including before each meal and before bed.

NICE recommend to test up to 10 times per day for patients:

- Whose target blood glucose control has not been achieved (shown by HbA1c level)
- Who are experiencing an increase in hypoglycaemic episodes
- Who have a legal requirement to do so e.g. before driving (Group 1 license: Car and Motorcycle: 2 hours prior to journey and every 2 hours whilst driving).
- During periods of acute illness
- Before, during or after sport
- If they are planning, during pregnancy or breastfeeding
- If there is a need to know e.g. driving for long periods for work. (Group 2 license: Bus and Lorry: 2 hours prior to journey and every 2 hours whilst travelling, plus need to test at least twice a day when not driving)

If this is the case, they should be prescribed a **maximum of 6 boxes per month.**

These recommendations also apply to patient with Type 2 diabetes, and are **using insulin.**

**Type 2 diabetes**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Frequency of Testing</th>
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</thead>
<tbody>
<tr>
<td>Sulphonylureas (gliclazide, glibenclamide, glimepiride, glipizide, tolbutamide) Or: Rapid acting insulin secretagogues (nateglinide, repaglinide)</td>
<td>Patients may need to self-test two to three times per week. <strong>Group 1 Driving License:</strong> May be appropriate to monitor blood glucose regularly and at times relevant to driving to enable detection of hypoglycaemia. <strong>Group 2 Driving License:</strong> Must test twice a day and at times relevant to driving. Approximately 50 strips every two to three months.</td>
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<tr>
<td>Controlled with metformin alone or with: Glitazone (pioglitazone), or Gliptins (linagliptin, saxagliptin, sitagliptin, vildagliitin), or GLP-1 analogues (exenatide, lixisenatide)</td>
<td>Patients do not need to routinely self-test. If test strips are required, they should not be put on repeat prescription.</td>
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<tr>
<td>Controlled with diet and exercise.</td>
<td>Patients do not need to self-test. If test strips are required, they should not be put on repeat prescription.</td>
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</tbody>
</table>

Adapted from the IESCCG document: Blood glucose monitoring in adults with type 2 diabetes (2014).

New NICE guidance (2015) suggests type 2 diabetics should only be offered routine self-monitoring if:

- They are on insulin.
- There is evidence of hypoglycaemic episodes.
- The person is on oral medication that may increase the risk of hypoglycaemia while driving or operating machinery
- They are planning on becoming or are pregnant.
- When starting treatment with oral or IV corticosteroids
- To confirm suspected hypoglycaemia.