

# Skin Integrity

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## Why is skin care so important?

- What are we trying to achieve with the technology?
  - Improved HbA1c
  - Improved quality of life
  - Reduction in hypos
  - High usage >80% of the time
  - High TIR >70%
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- What is the most important factor in achieving this?
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- If a patient is unable to adhere to wearing the sensor or cannula we cannot achieve the desired outcomes



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# Preserving Skin Integrity with Chronic Device Use in Diabetes

Laurel H. Messer , Cari Berget, Christie Beatson, Sarit Polsky, and Gregory P. Forlenza

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- Recent publication in Diabetes Technology and Therapeutics Journal – 2018
- Review current literature related to the prevalence of dermatological issues with insulin pumps and CGM.
- Discuss published solutions to skin irritation
- Share the consolidated experience of a large academic diabetes clinic to address placement, prophylactic skin care, adhesives, removal, and skin healing with diabetes device use

## Why is skin irritation an important topic to discuss?

- Skin integrity and placement are ongoing concerns for people with diabetes who utilize CGM and CSII. This is especially significant for individuals with skin sensitivities and paediatric patients.
- Dermatological complications are often cited as a barrier to device use and a reason for device discontinuation.
- With the increasing use of technology dermatological concerns are becoming more common in people with diabetes and a persistent topic in diabetes support groups and social media websites.
- Few resources are available, This paper is a guide on how to comprehensively assess, prevent, and treat skin conditions associated with diabetes device usage.

## Reasons for skin irritation

- CGM and CSII device usage can lead to skin injury and irritation (hypersensitivity reactions, contact dermatitis), scarring, and lipodystrophy.
- Reactions typically take a long period of exposure to induce initially, but may occur more rapidly after repeated exposure due to reactivation of memory cells.
- These reactions may occur in response to chemicals in CGM and infusion set adhesives

## Where should sensors be sited?

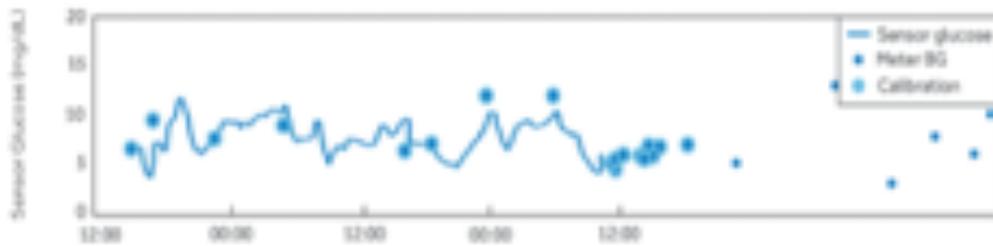
- Sensors are less likely to be accidentally dislodged if they were placed on a flat plane such as upper buttocks, upper arm, upper abdomen, or upper thigh.
- Regardless of location, when subcutaneous tissue is insufficient, individuals may feel persistent discomfort when the cannula/sensor
- Compression on the tissue may cause pressure induced sensor attenuation (PISA) in CGM users.
- PISA can be the cause of an artificially low sensor glucose reading when sited in inappropriate areas and can cause tissue damage

## Site tips

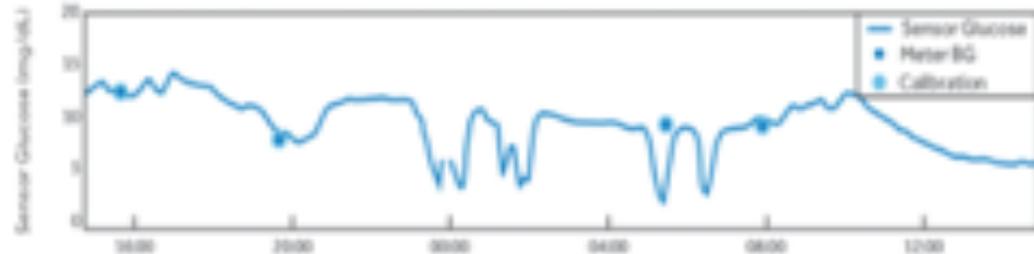
- Once an appropriate location has been identified, a variety of techniques and barrier agents may be used to minimize risk of reactions
- Good skin care practices such as thorough cleansing, gentle exfoliation (if needed), and omitting oil containing moisturizer are essential
- A common solution to previously known hypersensitivity reactions has been the off-label use of **nasal steroid sprays** being applied topically to the skin.
- Although there are no studies about long-term use of nasal steroids applied topically, it has been anecdotally endorsed as a way to prolong sensor use and protect skin from adverse reactions

- Bandages placed over the entire sensor and transmitter are not recommended due to buildup of moisture and further loosening of adhesive.
- Enhancing adhesion is important for a variety of device wearers, especially children (due to curvy surfaces and high activity levels), swimmers, individuals who live/work in high humidity, and athletes (due to increased perspiration and movement) – Skin Tac
- Careful removal techniques can greatly reduce the likelihood of contact dermatitis and mechanical injury from device use .
- As diabetes technologies evolve to use long-lasting skin adhered components, skin integrity must to be prioritized by the medical diabetes community.

## Sensor not secure causes sensor pull-out



## Pressure / twist on transmitter causes re-initialisations / artifacts



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Good site rotation

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Avoid sites in close proximity to the navel or another insulin infusion site

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Avoid sites where clothing can rub, where body naturally bends a great deal or sites that are scarred or have hardened tissue

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Do NOT use skin preparation solutions prior to insertion e.g cavilon

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Local anesthetic creams (EMLA) are ok

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Do not insert cannulas/sensors through tape

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Good Hydration

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Refer to allergy specialist