



## Supporting Management of People with diabetes using Out-of-Warranty Pumps while Ensuring Appropriate Patient Choice

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The COVID-19 pandemic has impacted all diabetes outpatient services, but in particular, the uptake of diabetes technology. Access to start insulin pump therapy (continuous subcutaneous insulin infusion CSII) or continuous glucose monitoring, has been reduced. This has affected those starting these therapies for the first time as well as those who were due to have renewals because their devices were out of warranty. We estimate over 8,000 people with diabetes may be using insulin pumps that are out of warranty and this has created a lot of alarm and concern amongst Healthcare Professional (HCP) teams as well as people with diabetes.

The diabetes technology industry has responded to this in part through the safe extension of insulin pump warranties that had been due to expire throughout 2020 and also in innovating in the provision of virtual pump starts for both continued and new pump users. Importantly, initiatives from the Diabetes Technology Network (DTN), JDRF, Diabetes UK (DUK) and individual NHS sites have allowed for virtual events which enable people with diabetes to gain the information and insight to make an informed choice on their future technology options.

Early analysis of a recent survey conducted by the DTN show that over two thirds of respondents reported reduced or significantly reduced insulin pump starts and renewals. A big impact has been availability of trained staff and inability to run group starts. 10% of respondents reported that all new pump starts and upgrades had been halted.

Patient choice is a key factor in someone choosing their first or renewal pump and over 90% of respondents reported offering patients a choice of three or more systems. 76% reported discussing those choices with educators and a quarter through “show and tell” meetings with industry representatives.

In response to these challenges, the DTN, working with industry partners through the Association of British HealthTech Industries (ABHI) diabetes group, has come up with three initiatives:

1. Virtual showroom [on the DTN website](#) that can allow people with diabetes to review available technologies and have an informed discussion with their HCP team.
2. A [SOP to advise on best practice](#) for the remote start of both insulin pump therapy and continuous glucose monitoring.
3. Further extension of insulin pump warranties till end of April 2021.



These initiatives, endorsed by the ABHI Diabetes industry group intend to:

- Provide a DTN and industry approved pathway to enable people with diabetes to access technology - responding to limitations placed by COVID-19.
- Create a platform that facilitates patient choice across all available technologies
- Allow for renewals for the thousands of patients whose pumps are now out of warranty during the ongoing COVID pandemic.
- Provide access to new to technology patients where this has been reduced or stopped due to COVID restrictions.
- Facilitate the use of industry specialists integrated with specialist nurses to maintain diabetes technology services, anticipating that specialist nurse time will be significantly reduced in the coming months.
- Mitigate risks for people using out-of-warranty devices and provide a clear pathway and timeline for offering those people appropriate choice if they are eligible for renewal.

Discussions between industry and the DTN show a mutual desire to continue supporting the NHS at this challenging time.

- The provision of warranty extensions provides NHS services with some “breathing space” whilst they deal with the current challenges.
- The virtual showroom offers an alternative for patients to do some research themselves and form an opinion of technologies they may choose to use.
- The virtual pathway allows provision to use industry support in a DTN approved manner, reducing the time required for insulin pump starts / changes of devices.

Whilst we are aware that all teams are facing a hugely challenging time at present, we hope that a clear timeline for warranty extensions until 30th April 2021 will ensure that existing insulin pump users are not disadvantaged. Furthermore, the use of virtual showrooms and virtual start SOPs allows teams to utilise industry support to manage out-of-warranty pumps whilst continuing to offer choice. This will be most applicable to insulin pumps from manufacturers who provide a four year warranty.

It is hoped that in the weeks and months leading up to 30th April, clinicians will be able to fully implement the DTN SOP and encourage all impacted patients to make use of online information to make an informed choice to either renew their existing system or start on an alternative. Colleagues should engage with their usual contact at individual companies for specific advice and support.

Following this extension period, if an individual’s pump malfunctions outside of the warranty period, the options available to the individual would be:

- Choose to stay on the same pump manufacturer. This would require HCP approval/purchase order as per local policy.

- Choose to move to a different pump manufacturer. This would require HCP approval/purchase order as per local policy and manufacturer specific system training.
- Revert to injection therapy whilst awaiting approval of pump therapy and provision of chosen pump.

Suggested next steps:

- Identify all patients who are using out-of-warranty pumps, or with their warranty due to expire in 2021. [Contact your local company representatives for assistance if necessary.]
- Contact these patients and inform them of the warranty extension to allay any anxiety, and also to ask them to look into their choices (depending on those offered locally). They can use the DTN virtual showroom as an additional resource.

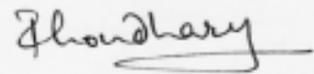
Organise virtual renewals for those who are eligible as per the DTN pathway. This allows for face to face starts where necessary, and company assisted virtual starts where needed.

We recognise the continued difficulties across the health system that will likely endure for many more weeks, and hope that implementation of this SOP will ensure the best possible approach for people living with type 1 diabetes by minimising disruption to their therapy, and continuing to enable choice.



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