

Latest news: GLP-1 agonists safety update, and National Diabetes Experience Survey results

Stay abreast of the latest news that could impact diabetes nursing.

GLP-1 agonists and the potential risk of pulmonary aspiration during surgery

The Medicines and Healthcare products Regulatory Agency (MHRA) has released a drug safety update. It alerts healthcare professionals (HCPs) to the potential risk of pulmonary aspiration in people using GLP-1 or dual GIP/GLP-1 receptor agonists (RAs) who undergo surgery or procedures with general anaesthesia or deep sedation.

The GLP-1 and dual GIP/GLP-1 RAs available in the UK include dulaglutide, exenatide, liraglutide, lixisenatide and semaglutide. Tirzepatide is a GLP-1 RA combined with a GIP RA.

In the update, HCPs are reminded that one of the effects of GLP-1 and GIP/GLP-1 RAs is to cause delayed gastric emptying. This may increase the risk of residual gastric contents despite preoperative fasting. Individuals with underlying diabetic gastroparesis, as well as other comorbidities such as obesity or gastro-oesophageal reflux disease, and symptoms of delayed gastric emptying (such as nausea, vomiting and abdominal pain) may be at higher risk of aspiration.

HCPs should also consider that individuals may have bought these medications for aesthetic weight loss and may not disclose this unless asked directly. They should also be aware that private prescriptions are not always included in medical notes or drug history.

The update also contains advice for HCPs to provide to patients who are taking a GLP-1 or GIP/GLP-1 RA. This includes informing their healthcare team, including the anaesthetist, about this prior to surgery as a modification to the pre-procedure instruction and anaesthetic technique may be required. Prescribed medicines should be taken as usual and not stopped without first discussing it.

The MHRA's drug safety update can be read [here](#).

National Diabetes Experience Survey results

Results from the first National Diabetes Experience Survey on the experiences of care among those living with type 1 or type 2 diabetes have been published by NHS England. They will be used to help improve experiences of self-management and care for people living with diabetes.

The survey was developed by people living with diabetes, carers of those living with diabetes, healthcare professionals and local providers, and was conducted in 2024. A random sample of adults in England living with type 1 or type 2 diabetes was invited to take part. Completed questionnaires were returned by 42 502 people, a response rate of 39%.

The survey covered a range of topics, including diagnosis, annual review, last NHS appointment, experiences of living with diabetes and experiences of using diabetes devices. The headline findings include the following:

Diagnosis

Before their diagnosis, 51% of those living with type 1 diabetes and 52% of those with type 2 diabetes did not recognise the symptoms of diabetes, resulting in a delay to their diagnosis.

Last annual review

A good experience was reported by 78% of those with type 1 diabetes and 84% of those with type 2 diabetes.

Impact of living with type 1 diabetes

Diabetes is a constant worry for 61%; diabetes stops 43% from being as physically active as they would like; 32% are worse off financially; and diabetes prevents 29% from having the social life they want.

Impact of living with type 2 diabetes

Diabetes is a constant worry for 37%; diabetes stops 31% from being as physically active as they would like; 19% are worse off financially; and diabetes prevents 22% from having the social life they want.

Confidence in managing their diabetes

Over the previous 12 months, 83% of those with type 1 diabetes and 83% with type 2 diabetes felt day-to-day confidence. A device is used by 96% of those with type 1 diabetes to manage their condition, with 95% of them feeling confident in doing so. For those with type 2 diabetes, 46% use a device, with 92% of them feeling confident in doing so.

It is hoped that the feedback from people about their experiences of their care and self-management will support the development of a more person-centred approach to delivering services for people with diabetes. The survey was also designed to provide

data that can be actioned at different levels of the NHS, and highlight any variation or inequalities experienced by different demographic groups or type of diabetes.

The results of the survey can be found at www.diabetessurvey.co.uk/latest-results.

Citation: Latest news: GLP-1 agonists safety update, and National Diabetes Experience Survey results. *Journal of Diabetes Nursing* **29**: JDN368
