Understanding new technologies – and how to best use them

Pelcome to this issue of the journal. The rapid advances in technology for diabetes care are challenging to keep up with. With the increasing use of hybrid closed-loop (HCL) systems and the improvements they afford, not just in glycaemic control but in quality of life, the need for all of us to keep up to date is essential. Our article from Sharanjit Cheema and the team at The Hillingdon Hospital explains their rationale for starting all children on HCL therapy from diagnosis and the benefits this approach is already demonstrating. It is well worth a read.

We are well aware of the difficulties and immense challenges for young people with diabetes as they progress from childhood into adulthood. The transition between diabetes services is a really difficult time and, all too often, we lose track of people from this cohort – in some cases for many years. Many services have put into place practices to reduce the departure from follow-up for this vulnerable group at a time when they may need it the most. Clinics that run outside of term time, in the evenings or even out of the hospital setting are just some examples of how we have adapted our service provision to offer the best care possible. Still, there are sadly too many young people who disengage with their service through this transition period.

The article by Kirsty Hallam, in which she discusses her diabetes youth worker role, is an example to us of an interesting innovation for this group. You can feel her passion as she describes her approach to building relationships, going directly to those who are disengaged or require additional support, and having the time to really appreciate the challenges they face with even getting to a clinic. Her role as a sounding board and a true advocate for them has, in a relatively short time, borne huge results in attendance and a reduction in DKA admissions. It really is an inspiring read!

Keeping with the technology theme, the expansion in use of continuous glucose monitoring has led to an inevitable rise in the number of system options available to us. This is only likely to increase

at a rapid rate, given the use of these technologies not just within our diabetes cohort, but also in the health and well-being industry. As such, it is imperative that we all understand the matrix behind these systems and the standards they all should meet in providing us with reliable, accurate data. It is not acceptable that, as healthcare professionals, we just assume that if a system has come to market it is of an acceptable standard on which to base insulin dose adjustments.

We saw exactly the same issue with capillary blood glucose monitoring systems in the past. There was an explosion of companies producing monitors and strips at very low cost, and a real push from our medicines management colleagues to use these options. I fully understand the expectation on us all to ensure that every pound is well spent by the health service; however, I feel we can only do this to good effect if we understand fully the systems we are recommending. I well remember being a thorn in the side locally when constantly challenging the ISO standards of some of these low-cost alternatives! These standards are a set of internationally recognised rules, guidelines or characteristics that ensure products, services and systems are safe, reliable and of good quality. They are developed by the International Organization for Standardization (ISO), a global body with representation from national standards organisations.

So, "Making sense of sensors: Evaluating CGM devices for safe and personalised insulin management" by Amanda Williams and her colleagues entirely resonates with me, and I welcome the incredible work of the Diabetes Specialist Nurse Forum UK in keeping us up to date with information and data on the systems available. I urge you to read the article. It is an invaluable commentary that really exposes the issues we should all be questioning as new systems come to the field.

I have every confidence that the DSN Forum will continue to update us all, as this rapidly expanding domain advances over the coming months and years.



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