

Industry update

With so many ongoing advances in the management of diabetes, this section keeps you up to date with product-related developments and other relevant news

Diabetes remission success scoring after gastric bypass

Details of a new scoring system, named DiaRem, which can predict the people most likely to achieve diabetes remission within a 5-year time period after gastric bypass surgery, were published in September in *The Lancet*.

The system, which is based on four basic pre-operative clinical variables (insulin use, age, HbA_{1c} concentration and type of diabetic drugs used), was created following the retrospective analysis of 690 obese people with type 2 diabetes, who underwent Roux-en-Y gastric bypass at the Geisinger Health System Clinic, Danville, USA, between 2004 and 2011.

Wockhardt Ltd recalls its gliclazide preparation

In October, the Medicines and Healthcare products Regulatory Agency (MHRA) requested pharmacies, dispensing clinics and wholesalers to return five different prescription-only medicines in a variety of strengths manufactured by Wockhardt Ltd. Of these, gliclazide, a type 2 diabetes drug was included. This follows a precautionary recall made by Wockhardt.

This was not a patient recall; patients are advised to continue their medication as there is no evidence that the medicines affected by the precautionary recall in the UK are defective.

Manufacturing deficiencies identified by the MHRA during the inspection of Wockhardt's Chikalthana, India, site in July 2013 included poor record-keeping relating to the manufacture and testing of the medicines made at the site.

Abbott's advances in sensor technology: Flash Glucose Monitoring

At the EASD (European Association for the Study of Diabetes) conference in September, Abbott introduced their latest developments in blood glucose monitoring using sensor technology.

Still at an investigational stage, this next-generation "Flash Glucose Monitoring" system is designed as an alternative to traditional blood glucose monitoring.

The new technology collects continuous glucose data through a sensor worn on the arm and will generate an "Ambulatory Glucose Profile" so that people with diabetes and their healthcare professionals can identify trends in their

glucose levels over a period of time.

People can measure their blood glucose by scanning a wireless reader over the sensor patch to get their glucose value, a glucose trend arrow and a trend graph showing the last 8 hours. An important benefit of this new system is that it does not require fingerstick calibration, as with other continuous glucose monitoring systems.

Questions remain about the pricing but clinical trials are still ongoing. Abbott will announce further details on this closer to the launch date; Abbott expects the product to be launched in Europe in the second half of 2014.

Lyxumia[®] receives approval to be prescribed in Scotland

The Scottish Medicines Consortium has given the go-ahead to make Sanofi's Lyxumia[®] (lixisenatide) available for prescription for the treatment of type 2 diabetes in those for whom a glucagon-like protein-1 (GLP-1) agonist is appropriate, as an alternative to existing GLP-1 agonists.

Lyxumia[®] is an injected, once-a-day, GLP-1 receptor agonist and works in combination with insulin treatment to regulate glucose levels. It specifically works by reducing after-meal glucose, as well as complementing the reduction in before-meal levels of glucose caused by the insulin treatment.

While now available in Scotland, the drug is yet to be approved by watchdogs in England, Wales and Northern Ireland.

New NICE draft guidance for weight management services

The National Institute for Health and Care Excellence (NICE) has begun a consultation on new draft guidance for lifestyle weight management services in the community.

The draft guidance does not cover preventing obesity, or pharmacological or surgical treatments for obesity, and is aimed at commissioners, local authority managers and directors of public health and their teams.

Draft recommendations include ensuring there is a non-blaming attitude towards the patient; addressing adults' expectations of a lifestyle weight management programme; and referring individuals to lifestyle weight management programmes when appropriate.