

Are you ready to pump?

The decision to use an insulin pump is not an easy one. There is a lot involved with managing diabetes using a pump.

Take some time to make this decision. Talk about it with your family and your health care providers. Consider the benefits and drawbacks. Make sure your expectations are realistic.

At a pump information class, the diabetes team will go over what is expected. This booklet gives you a record of this information that you can review at home.

What are the benefits and drawbacks of using an insulin pump?

Benefits

- Fewer injections as the insulin is given through an infusion. This needs to be changed every 2 to 3 days.
- Easier to match insulin to your lifestyle.
- Can improve blood sugar control.

Drawbacks

- An insulin pump is only as good as the person using it. It takes a lot of work to get the benefits.
- Some people are not comfortable being attached to the pump 24 hours a day.

How will I know if I'm ready for an insulin pump?

Review this checklist to see if you are ready to pump:

- You have attended all of your appointments with our program for at least 9 months.
- You will attend a pump information session at McMaster Children's Hospital.
- You agree to attend all scheduled pump appointments, including follow-up appointments.
- Both you and your parents are interested. Your parents must agree to be involved in your diabetes care.
- Children less than 12 years old must have adult supervision to use a pump.** As a parent of a young child, you need to know that **school and day care workers will not operate the pump.** You need to have a plan to operate the pump when your child is out of your care. You must be available at all times if there is a problem.
- You check your blood sugar at least 4 times a day and record the results in a logbook. You and your parents review your results and make appropriate insulin adjustments.
- You and your family have realistic expectations about what a pump can and cannot do, as well as the time commitment involved in getting started. The number of appointments is different for each person, depending on his or her needs, skills and support.
- You have a back up plan to inject insulin the regular way if the pump fails.

Planning for your pump start

1. Getting approval

All children and teens considering pump therapy must meet with the Child Life Specialist and/or Social Worker.

With their approval, you can move to the next step. You will have several appointments with various members of the diabetes team. The plans for your pump start will depend on your needs, skills and support.

2. Understanding your nutrition

To make sure you will be safe when starting pump therapy, you will be asked to complete food diaries and review them with the dietitian.

Accurate food diaries show that you are:

- familiar with the Canadian Diabetes Association's Good Health Eating Guide
- able to follow a meal plan
- able to count grams of carbohydrate accurately

This step is very important. If your food diaries are not completed accurately, the pump start will be delayed. The dietitian will work with you until you can successfully complete this step.

3. Planning to pump start

You will need to keep a regular daily routine for several weeks after starting an insulin pump. This is not the time to travel, take a vacation or go to sports camp.

4. Getting your pump

We do not have insulin pumps in our clinic. You need to contact all the pump companies to select the pump that will be right for you. Then, tell us which company you have chosen and we will send them the right forms.

You will need to have your pump 2 weeks before your pump training appointment. Read all the information that comes with the pump. Practice with it so that you feel comfortable with it by your training appointment.

5. Pump training

Pump training is usually scheduled the week before the pump start. This gives you a week to practice your skills.

At the pump training appointment:

- Bring your pump and supplies.
- The nurse will review how the pump works.
- You will leave wearing your pump with saline running. There is no insulin in the pump. You will continue to give yourself insulin in the usual way.

6. Pump start

At this appointment the saline will be replaced by insulin. You will start to manage your diabetes with the pump.

For 2 to 3 weeks after starting an insulin pump, you will need to:

- Check your blood sugar 8 to 10 times a day. This includes checking at midnight and 3 am.
- Keep your food and activity to a routine. At the start of pump therapy, we do not recommend making changes in your food intake.

7. Follow-up

Two weeks after starting the pump, you will have an appointment to meet with the doctor, nurse and dietitian.

If all goes well, the extra testing and food diaries can be stopped. You will learn how to make adjustments now that you are successfully pumping.

Questions?

Any time that you have questions or concerns, please speak with a member of your diabetes team.

What does an insulin pump cost?

The Assistive Devices Program (ADP) will pay for your pump and a portion of the cost of your supplies, if you meet certain conditions.

To qualify for ADP funding, you must meet these eligibility criteria:

- ✓ Daily blood glucose monitoring before each meal and before bedtime.
- ✓ Keeping a written record of blood sugar results.
- ✓ Site changes every 2 to 3 days.
- ✓ Correct site rotation.
- ✓ Able to adjust basal and bolus insulin to achieve target blood sugar levels.
- ✓ Regular clinic visits – at least 3 each year.
- ✓ Maintain an A1C < 10%.
- ✓ No more than 1 hospital visit for DKA in the 6 months before starting the pump and no more than 1 DKA visit a year after pump therapy has started.

At your pump start, we will give you an ADP application form. You are responsible for:

1. Signing a contract that you agree to meet the eligibility criteria.
2. Completing the ADP application form properly.
3. Making sure the completed, original form (not a copy) is received at the Ministry of Health office.

