



my diabetes ★ my way

Using Technology to support Self-management in Diabetes

Dr Scott G Cunningham, University of Dundee
Michelle Brogan, Scottish Centre for Telehealth and Telecare

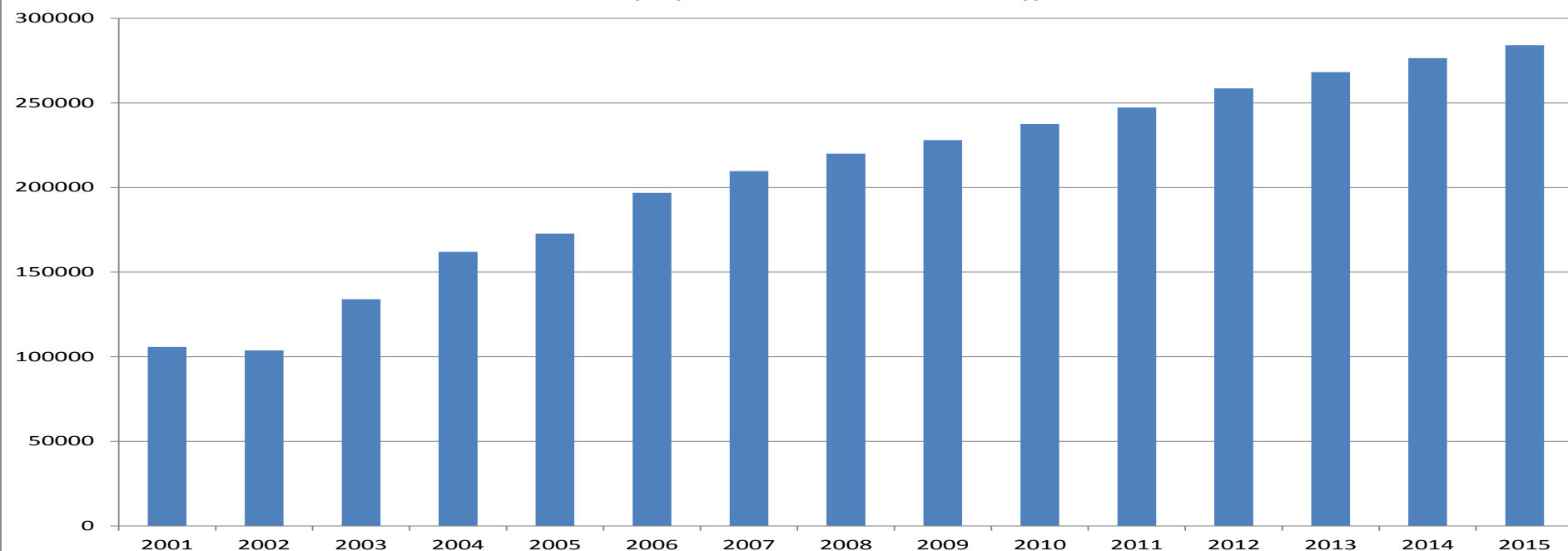
Overview

- Introduction to
 - My Diabetes My Way
 - Remote Monitoring Solution (Diasend)
- Scaling up experiences & outcomes from United4Health Programme in Scotland
- Discussion & Q&A

Diabetes in Scotland

- Scotland's diabetes prevalence
 - 2002: 103,835 (2%)
 - 2015: 284,123 (5.3%)
 - Type 1: 10%; Type 2: 89%; Other types: 1%
 - 148,487 (15.3%) aged 65 and over

Number of people recorded with diabetes (all types).



BALL, Dennis

Patient ID/CHI **0106430079**

Born **01-Jun-1943 (73y)**

Gender **Female**

Address **An Address, In A Town...**

Practice **Tayside Practice 3, Tay...**

Diagnosis **Type 2 Diabetes Me...**

Treatment **Insulin + Oral Agent...**

Allergies recorded

Navigation < Population Overview > Type 2 Diabetes - Population Overview > Patient Record > **Clinical Summary**

Refresh

- ⚠ Patient Record

⊕ Patient Facilitation

⊕ Demographics

Clinical Summary

QOF Summary

⊕ Paediatrics

⊕ DSN

⊕ Specialist Clinic Support

⊕ ⚠ Detailed Clinical Record

⊕ Patient Support

⊕ Data Quality

Clinical Summary

Help

Diabetic Diagnosis/Status

Diabetes Type: **Type 2 Diabetes Mellitus**

Next Specialist Clinic Review: **02-Sep-2015** **Other**

Date of Diagnosis: **10-Sep-2004**

Other: **discharge to GP**

[Prescribing Timeline Function](#)

Diabetes Education (Patient Education History) (view and enter detailed education information for this patient)

Latest Participated Education Record:

[My Diabetes My Way](#)

Not Registered

Last Accessed:

Diabetic Complications

[CHD](#) Not Recorded [record no diagnosis](#)

[CKD](#) Not Recorded [record no diagnosis](#)

[Cerebrovascular Disease](#) Not Recorded [record no diagnosis](#)

[Neuropathy](#) Yes

[PVD](#) Not Recorded [record no diagnosis](#)

[Eye Disease](#) Not Recorded

History of actively excluded diagnoses

[Diabetes Cross-Disciplinary Index \(DXDI\)](#)

Overall DXDI score: 28-Jul-2015 **23/40**

Biochemistry

HbA1c: **04-May-2016** **45** mmol/mol

Total Cholesterol: **27-Dec-2012** **36** mmol/L

Non-HDL Cholesterol: **mmol/L**

Renal Care:

Renal Function

Creatinine: **01-Aug-2011** **115** µmol/L

estimated GFR: **27-Dec-2012** **58** mL/min

Urinary Protein Status

ACR: **09-Apr-2013** **1.1** mg/mmol

Microalbumin Concentration: **mg/L**

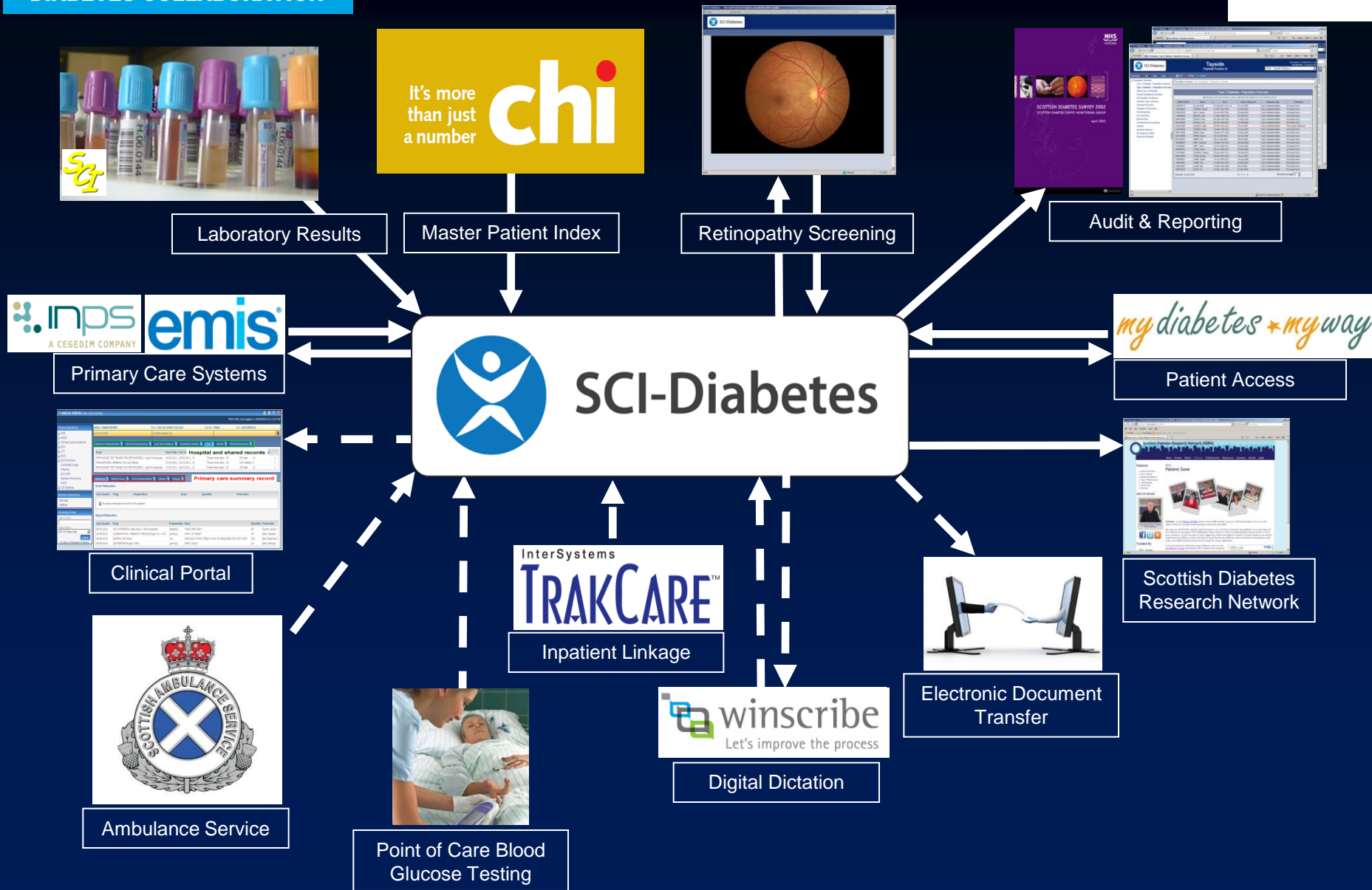
PCR: **mg/mmol**

Urinary Protein Status: Insufficient Data

Cardiovascular:

BP: **05-Jun-2014** **120** / **82**

SCI-Diabetes Data Flows



My Diabetes My Way

- Website for patients and carers
- Information leaflets
- Interactive content
 - Videos / Patient Testimonials / Interactive tools
- Validated internal/external content
- Overseen by multidisciplinary group
 - Patients / HCPs / IT professionals
- Live since October 2008

My Diabetes My Way - Diabetes Information in Scotland - Microsoft Internet Explorer provided by NHS Tayside

http://www.mydiabetesmyway.scot.nhs.uk/




Google

My Diabetes My Way - Diabetes Information in Scotland

Page Safety Tools

mydiabetes*myway
... the interactive diabetes website

ACCESS YOUR RECORDS


LOGIN  

home what is diabetes my complications my medication my lifestyle my family my diabetes my local services my involvement


home >

my diabetes my way is the NHS Scotland interactive diabetes website to help support people who have diabetes and their family and friends.

You'll find leaflets, videos, educational tools and games containing information about diabetes. You can now also use this website to view your own up-to-date diabetes clinic results, to help you manage your condition more effectively.


Diabetes (know formally as Diabetes Mellitus) is a long-term condition caused by too much glucose, a type of sugar, in the blood. There are over 250,000 people with diabetes in Scotland - that's around one person in every twenty.

In the case of an emergency, view the emergency contact leaflet [here](#)




My Diabetes
Sign up to gain access to your own test results, clinic letters and your treatment plan. Take advantage of this opportunity which is only available in NHS Scotland.


LOGIN REGISTER




What is Diabetes?
Understand the different types of diabetes mellitus and learn how to manage your type of diabetes. Read about blood glucose monitoring.




My Complications
Learn how poor diabetes control affects your body. Reduce your risk of complications or prevent worsening of existing symptoms. Read about treatment of diabetes complications.



My Medication
Increase your knowledge of the diabetes treatments available for your type of diabetes. Learn about how to administer your medications - insulin and non-insulin treatments are discussed.

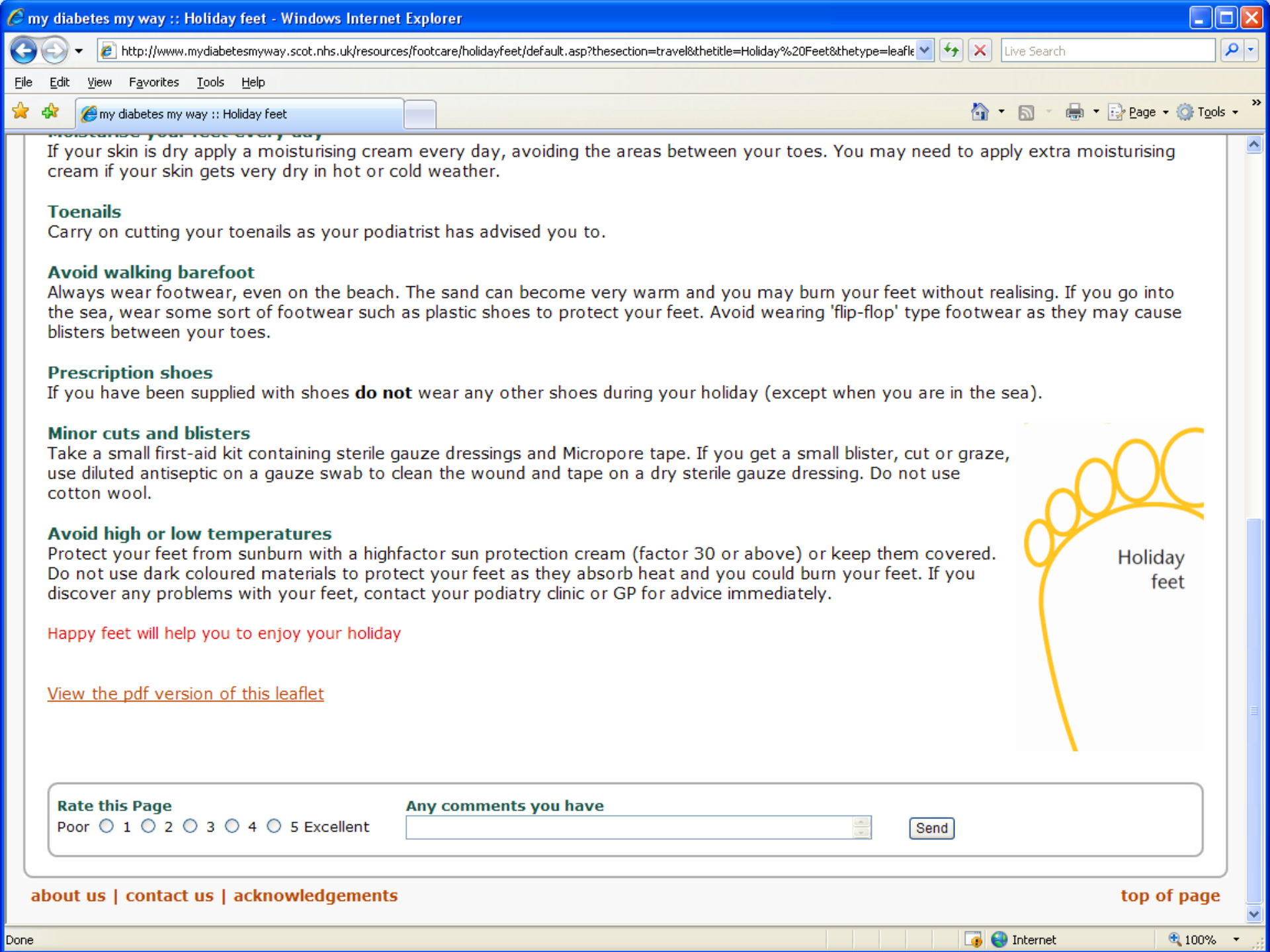


My Lifestyle
This section discusses how diabetes affects your life, including topics such as driving, employment, travel and exercising.



My Family
This section contains information to help support you or your family when dealing with diabetes. It covers diabetes and pregnancy and resources for children and parents of children who have diabetes.

Internet | Protected Mode: Off 100%



If your skin is dry apply a moisturising cream every day, avoiding the areas between your toes. You may need to apply extra moisturising cream if your skin gets very dry in hot or cold weather.

Toenails

Carry on cutting your toenails as your podiatrist has advised you to.

Avoid walking barefoot

Always wear footwear, even on the beach. The sand can become very warm and you may burn your feet without realising. If you go into the sea, wear some sort of footwear such as plastic shoes to protect your feet. Avoid wearing 'flip-flop' type footwear as they may cause blisters between your toes.

Prescription shoes

If you have been supplied with shoes **do not** wear any other shoes during your holiday (except when you are in the sea).

Minor cuts and blisters

Take a small first-aid kit containing sterile gauze dressings and Micropore tape. If you get a small blister, cut or graze, use diluted antiseptic on a gauze swab to clean the wound and tape on a dry sterile gauze dressing. Do not use cotton wool.

Avoid high or low temperatures

Protect your feet from sunburn with a highfactor sun protection cream (factor 30 or above) or keep them covered. Do not use dark coloured materials to protect your feet as they absorb heat and you could burn your feet. If you discover any problems with your feet, contact your podiatry clinic or GP for advice immediately.

Happy feet will help you to enjoy your holiday

[View the pdf version of this leaflet](#)



Rate this Page

Poor ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 Excellent

Any comments you have

my diabetes my way
... the interactive diabetes website



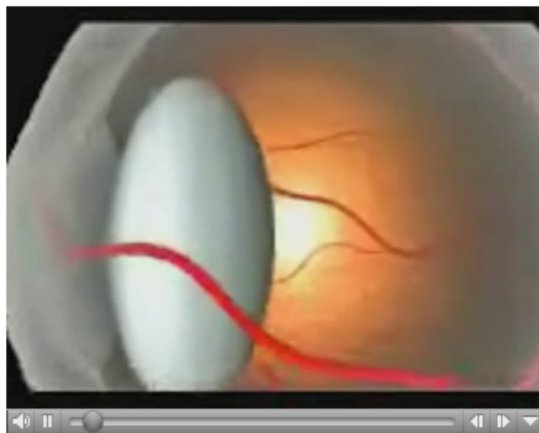
[home](#) | [my mind](#) | [my body](#) | [my lifestyle](#) | [my diabetes](#) | [my local services](#) | [my involvement](#)

[home](#) > [my body](#) > [eyes](#) > diabetic retinopathy

Diabetic retinopathy

This video shows you what goes on inside the eye at different stages of diabetic retinopathy.

[View the Windows Media Player version of this video.](#)



Rate this Page

Poor ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 Excellent

Any comments you have

Send

[about us](#) | [contact us](#) | [acknowledgements](#)

[top of page](#)

SCI-Diabetes - Clinical Summary

scide-ph3-web.tnhs.tayside.scot.nhs.uk/Phase3/overview/Type2/Gms.aspx

SCI-Diabetes
Tayside
(10361-Tayside Practice 3)

STATUS: GREEN
File transferred within last 24 Hours...

Patient record is in data entry mode.

Main Menu User Help Domains Contact Forms Save Print Reset Undo Reset Default Logout (CUNNINGHAM)

BROWN, Alice
Address New Address, In A Vil...
Practice Tayside Practice 3, Tay...
Patient ID/CHI 1105600043
Born 11-May-1960 (55y)
Diagnosis Type 2 Diabetes Me...
Gender Female
Treatment

Navigation Population Overview > Type 2 Diabetes - Population Overview > Patient Record > Clinical Summary

Clinical Summary

Diabetic Diagnosis/Status

Diabetes Type: **Type 2 Diabetes Mellitus**
Date of Diagnosis: **06-Apr-2015**
[Prescribing Timeline Function](#)

Next Sp. Clinic Review: **6 Months**
Other:

[Local Drug Trial Overview](#)

Diabetes Education (Patient Education History)

(view and enter detailed education information for this patient)

Latest Participated Education Record: 06-Nov-2014 - Level 3
[My Diabetes My Way](#) Not Registered

Diabetic Complications

CHD	Yes		CKD	Yes
Cerebrovascular Disease	Not Recorded	record no diagnosis	Neuropathy	Yes
PVD	Not Recorded	record no diagnosis	Eye Disease	Not Recorded

History of actively excluded diagnoses

Diabetes Cross-Disciplinary Index (DXDI)

Overall DXDI score: 04-Aug-2015 **19/35**

Biochemistry

HbA1c:	15-Mar-2016	53	mmol/mol		Total Cholesterol:	08-Oct-2015	5.4	mmol/L	
					LDL Cholesterol:	10-Feb-2015	34	mmol/L	

Renal Care

Renal Function

Creatinine:	26-May-2015	53	umol/L	
estimated GFR:	02-Apr-2015	60	ml/min	

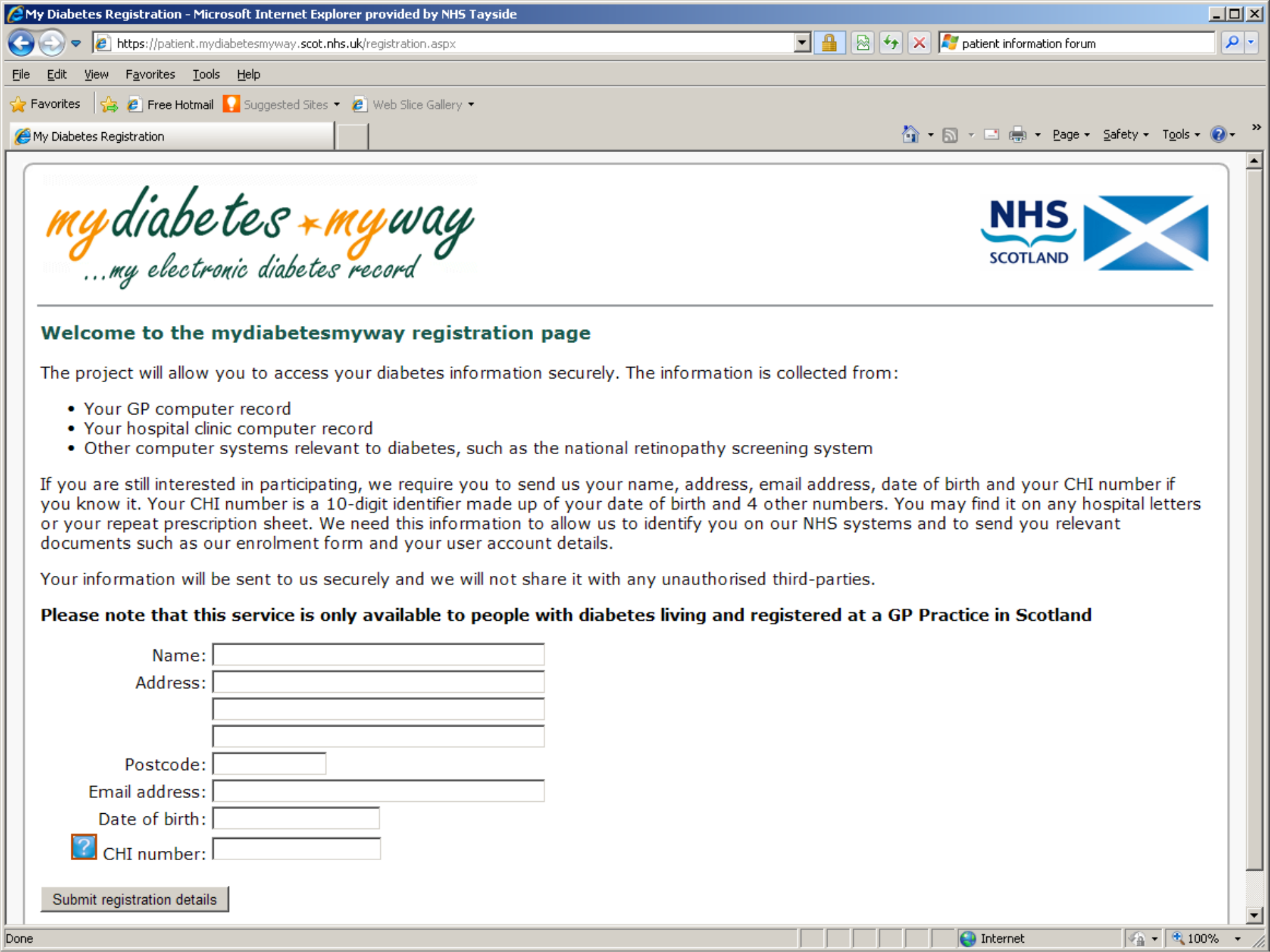
Urinary Protein Status

ACR:	10-Feb-2015	2.3
Microalbumin Concentration:	10-Feb-2015	36
PCR:	10-Feb-2015	20
Urinary Protein Status:		Normoalbuminuria



MDMW Personal Health Record

- Limited to key diabetes data
- Information to explain clinical measurements
- Feedback processes to report errors
- Full system audit trail
- Live since December 2010
- Available to anyone with diabetes in Scotland



Welcome to the mydiabetesmyway registration page

The project will allow you to access your diabetes information securely. The information is collected from:

- Your GP computer record
- Your hospital clinic computer record
- Other computer systems relevant to diabetes, such as the national retinopathy screening system

If you are still interested in participating, we require you to send us your name, address, email address, date of birth and your CHI number if you know it. Your CHI number is a 10-digit identifier made up of your date of birth and 4 other numbers. You may find it on any hospital letters or your repeat prescription sheet. We need this information to allow us to identify you on our NHS systems and to send you relevant documents such as our enrolment form and your user account details.

Your information will be sent to us securely and we will not share it with any unauthorised third-parties.

Please note that this service is only available to people with diabetes living and registered at a GP Practice in Scotland

Name:

Address:

Postcode:

Email address:

Date of birth:

 CHI number:

SCI-Diabetes - Demographics - Windows Internet Explorer

http://localhost/scidiabetes/searchPatRecord/PatientSearch/Demographics.aspx

File Edit View Favorites Tools Help

Favorites

Suggested Sites

Staffnet

Google

DEV3

Patient Access dev

MDMW live

Patient Access admin dev

SCI-Diabetes - Demographics

Convert Select

Page Safety Tools

SCI-Diabetes

Tayside Paediatric Diabetes Clinics

Main Menu

User

Help

Contact

Forms

Save

Print

Reset

Undo Reset

Default

CHI Refresh

Logout (BRILLANTE, Massimo)

BRADY, Gerald

Patient ID/CHI0412037173

Born04-Dec-1903 (110y)

GenderMale

AddressA RESIDENCE, SOMEWHERE...

Practice

Diagnosis

TreatmentNo Glycaemic Drugs F...

Allergies not recorded

Clinical Summary

Clinic Recording

Eye Care

Foot Care

Renal Care

Primary Care Prescribing

Specialist Prescribing

Medical History

Lab Results

Clinical Comments

New Comment

Lifestyle

Glycaemic Control

Clinic Outcome Test Requests

Diagnostic Information

Patient Goals

Navigation

Search For A Patient Record > Patient Search > Search Results > Patient Record > Demographics

Refresh

Help

Patient Record

Demographics

Clinical Summary

QOF Summary

Paediatrics

Specialist Clinic Support

Detailed Clinical Record

Patient Support

Data Quality

Patient has On-line Access to

Personal Details

Patient ID/CHI:0412037173

Name:

Preferred Forename:

Patient's Practice

Practice Code:

Practice Email:

Contact Information

Address:

A RESIDENCE

SOMEWHERE IN TAYSIDE

Post Code:DD4 6LZ

Home Phone Number:

Clear

Mobile Phone Number:

Clear

Enter alternative correspondence address

Diversity

Ethnicity:

Language:

Interpreter Required:

My Diabetes My Way Account Request Details

When you click on Confirm an email will be sent to mbrillante@nhs.net containing account request details for patient access to My Diabetes My Way.

Patient:BRADY, Gerald

Patient ID/CHI:0412037173

Date of Birth:04-Dec-1903

Gender:Male

I confirm that I have verified the identity of this patient.

Confirm

Cancel

details for My Diabetes My Way to patient.

04-Dec-1903

Male

Work Phone Number:

Clear

E-Mail Address:mbrillante@nhs.net

Clear

Preferred Contact Method:

Done

Local intranet | Protected Mode: Off

100%



...my electronic diabetes record my diabetes my way, my electronic diabetes record



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

My Personal Details

These are the personal details from your diabetes medical record.

If any of them are wrong, please let us know **by contacting your diabetes team**

? **Date of Birth:** 29/05/1932

? **CHI Number:** 290532V[DC

? **Address:** A RESIDENCE, SOMEWHERE IN TAYSIDE, DUNDEE

? **Type of Diabetes:** Type 1

? **Year of Diagnosis:** 1995

? **General Practice:**

? **Registered GP:**

My Links (Show More)



[Hypoglycaemia](#)



[Diabetes explained](#)



[Hands on Insulin](#)



[Coping with Illness](#)



[Insulin Injection Technique](#)



[Insulin Pumps](#)



[Reviewing your diabetes](#)

Print Options



[Create PDF](#)



[Print this page](#)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)

[Top of page](#)

mydiabetes * myway



My Diabetes My Way - Die x

www.mydiabetesmyway.scot.nhs.uk/resources/leaflets/InsulinInjection

logout

mydiabetes * myway
... the interactive diabetes website

ACCESS YOUR RECORDS



home what is diabetes my complications my medication my lifestyle my family my diabetes
my local services my involvement

> insulin injection technique

Insulin Injection Technique

Storage of insulin

- Insulin should be stored in fridge 2 - 8 ° C
- Insulin in use can remain at room temperature for 4 weeks (5 weeks for Levemir).
- However avoid any exposure to direct sunlight or heat from radiator.

Appearance of insulin

- a) Quick Acting (QA) insulins are clear in appearance.
- b) Long Acting (LA) Analogues (Lantus and Levemir) are also clear solutions so it is important to check the name on your insulin.
- c) Isophane insulins (Humulin I - Insulatard) and Mixed insulins are cloudy. These insulins need to be resuspended because the insulin is bound to a protamine that slows its action. It is therefore essential to mix the insulin so that it is cloudy in appearance throughout.








Insulin comes in:

www.mydiabetesmyway.scot.nhs.uk/Diabetes/default.asp






[my preferences](#) | [logout](#)[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE



My Lifestyle

Height: 1.69 metres (5ft 7in) on 13/01/2016**Weight:** 74kg (11st 10lb) on 25/01/2016  **Waist Circumference:** 90cm on 17/02/2016  **BMI:** 25.9 kg/m² on 25/01/2016 **Influenza Immunisation:** [no result]**Smoking Status:** Current smoker on 03/02/2016
Cigarettes per day: Smoking 21 cigarettes per day on 03/02/2016 **Recorded allergies:** More than one allergy recorded.  **Manage my Food Diary:** 

My Links

-  [Reviewing your diabetes](#)
-  [Diet and Diabetes](#)
-  [Exercise and Diabetes](#)
-  [Smoking and Diabetes](#)
-  [Interactive Store Tour](#)

Print Options

-  [Create PDF](#)
-  [Print this page](#)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)[Top of page](#)

mydiabetes * myway

...my electronic diabetes record

[my preferences](#) | [logout](#)[my details](#) | [my lifestyle](#) | [my](#)
ARCHIBALD MACKIE

My Lifestyle

Height: 1.69 metres (5ft 7in) on 25/01/2020**Weight:** 74kg (11st 10lb) on 25/01/2020**Waist Circumference:** 90cm on 25/01/2020**BMI:** 25.9 kg/m² on 25/01/2020**Influenza Immunisation:** []**Smoking Status:** Current smoker
Cigarettes per day: Smoking**Recorded allergies:** More than 10**Manage my Food Diary:** [][Contact your diabetes team](#) |

My Diabetes My Way - Google Chrome

dev3.hicest.dundee.ac.uk/patientaccess/definition.aspx?item=BMI

mydiabetes * myway

...my electronic diabetes record

BMI

Body Mass Index (BMI) is a measurement of your weight in relation to your height. It is used by healthcare professionals to assess if an individual's weight is putting their health at risk.

For people of European extraction is best to keep your BMI in the range between 18 and 25 kg/m² to reduce the risk of associated health problems.

In higher risk populations (e.g. South Asian and Chinese), the BMI threshold associated with health problems is lower, for example BMI >23 kg/m² may be associated with increase risk of health problems and BMI>27.5kg/m² considered high risk (equivalent to >30 kg/m² in Caucasian populations) .

Ref: **NICE Public Health Guidance 46.**

"Assessing body mass index and waist circumference thresholds for intervening to prevent ill health and premature death among adults from black, Asian and other minority ethnic groups in the UK"

[my recordings](#) | [my summaries](#)

My Links

- [Reviewing your diabetes](#)
- [Diet and Diabetes](#)
- [Exercise and Diabetes](#)
- [Smoking and Diabetes](#)
- [Interactive Store Tour](#)

Print Options

- [Create PDF](#)
- [Print this page](#)

[Top of page](#)



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

My Test Results

[?](#) **My target chart:**

[?](#) **HbA1c:** 36.0 mmol/mol (5.4%) on 17/01/2016

[?](#) **Blood Glucose:** 4.0 mmol/L on 27/02/2016

[?](#) **Blood Pressure:** 130/80 mmHg on 05/02/2016

[?](#) **Total Cholesterol:** 4.5 mmol/L on 27/02/2016

[?](#) **HDL Cholesterol:** 1.50 mmol/L on 28/01/2016

[?](#) **LDL Cholesterol:** 1.2 mmol/L on 28/01/2016

[?](#) **Triglycerides:** 2.4 mmol/L on 14/01/2016

[?](#) **Creatinine:** 88.0 umol/L on 24/02/2016

[?](#) **Albumin/Creatinine Ratio:** > 2 mg/mmol on 12/02/2016

[?](#) **eGFR:** > 68 ml/min on 20/01/2016

My Links

- [Reviewing your diabetes](#)
- [What Care to Expect](#)
- [Blood Sugar Testing](#)
- [Change in HbA1c Results](#)

Print Options

- [Create PDF](#)
- [Print this page](#)

mydiabetes * myway
...my electronic diabetes record



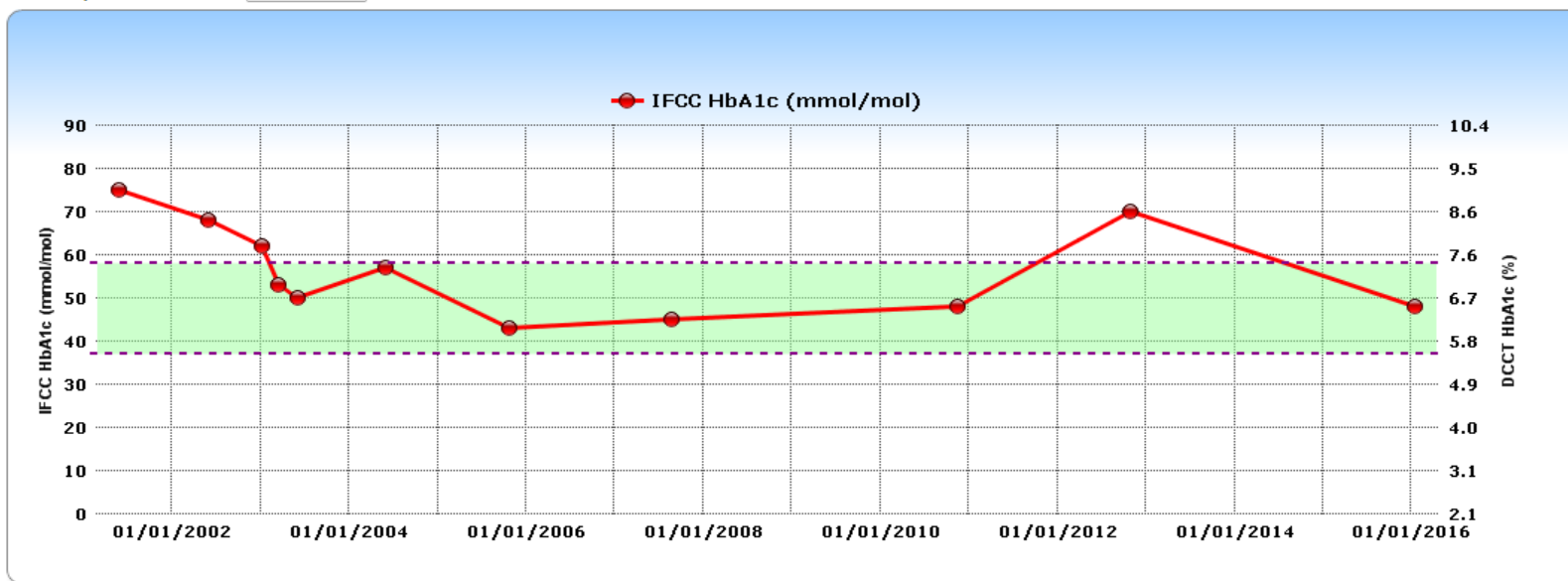
[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

[My HbA1c History](#)

Select period to view



Date	IFCC HbA1c (mmol/mol)	DCCT HbA1c (%)	Source
17/01/2016 18:55	48.0	6.5%	Tayside Practice 1 - GPASS, Primary Care
01/11/2012	70.0	8.6%	Tayside Practice 1 - GPASS, Primary Care
18/11/2010	48.0	6.5%	Tayside Practice 1 - GPASS, Primary Care
24/08/2007	45.0	6.3%	Tayside Practice 1 - GPASS, Primary Care
25/10/2005	43.0	6.1%	Tayside Practice 1 - GPASS, Primary Care
01/06/2004	57.0	7.4%	Tayside Practice 1 - GPASS, Primary Care
03/06/2003	50.0	6.7%	Tayside Practice 1 - GPASS, Primary Care
20/03/2003	53.0	7.0%	Tayside Practice 1 - GPASS, Primary Care

*my diabetes * my way*
...my electronic diabetes record

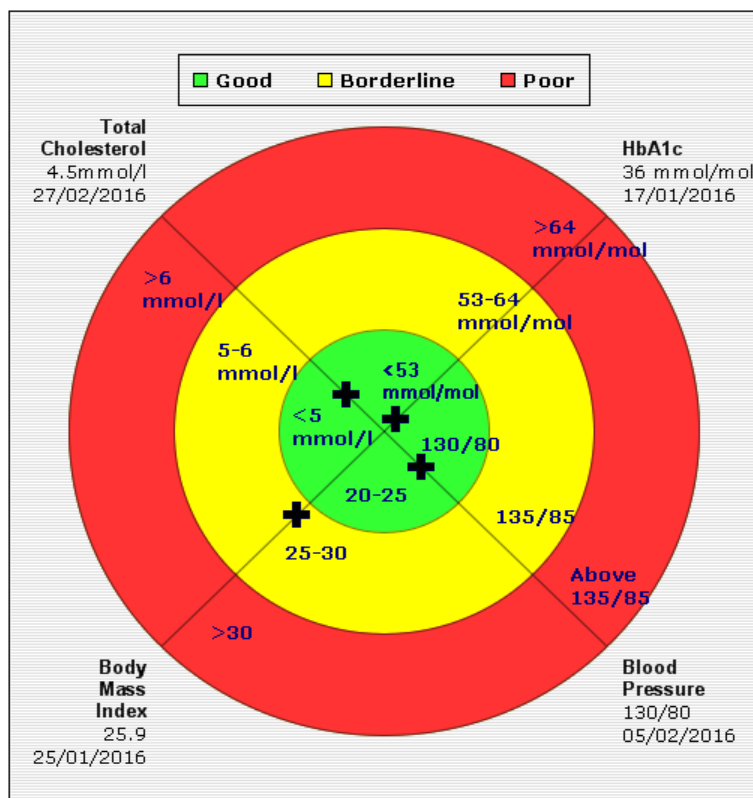


[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

My Target Chart





[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

My Eye Screening

Last Retinal Screening: 07/01/2016

? Retinal Status

Right Eye: No Retinopathy on 07/01/2016

Left Eye: No Retinopathy on 07/01/2016



? Maculopathy Status

Right Eye: No Maculopathy on 07/01/2016

Left Eye: No Maculopathy on 07/01/2016



? Visual Acuity

Right Eye: 6/6 (Corrected) on 07/01/2016

Left Eye: 6/6 (Corrected) on 07/01/2016



My Links



[Reviewing your diabetes](#)



[Diabetic Eye Disease](#)



[Eye Screening Journey](#)



[Eye Care Testimonial](#)



[Eye Screening](#)

Print Options



[Create PDF](#)



[Print this page](#)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)

[Top of page](#)

mydiabetes * myway
...my electronic diabetes record



my preferences | logout

My Diabetes My Way - Di

www.mydiabetesmyway.scot.nhs.uk/resources/retinopathy/retinopathy

mydiabetes * myway
... the interactive diabetes website

ACCESS YOUR RECORD

NHS SCOTLAND

LOGIN Like Follow

home what is diabetes my complications my medication my lifestyle my family my diabetes
my local services my involvement

> diabetic retinopathy

Retinopathy
This video shows you what goes on inside the eye at different stages of diabetic retinopathy
If you have difficulty viewing this video please click [alternative player](#)

Retinopathy



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

My Foot Screening

- Foot Risk Category**
Moderate Risk on 27/01/2016
- Peripheral Pulses**
Right Foot: Present on 27/01/2016
Left Foot: Present on 27/01/2016
- Foot Sensation**
Right Foot: Normal on 27/01/2016
Left Foot: Normal on 27/01/2016
- Monofilaments**
Right Foot: Normal - Foot Unspecified on 27/01/2016
Left Foot: Normal - Foot Unspecified on 27/01/2016
- Foot Vibrations**
Right Foot: Normal on 27/01/2016
Left Foot: Normal on 27/01/2016

My Links

- [Reviewing your diabetes](#)
- [Foot care leaflet](#)
- [Foot care video](#)
- [Footwear advice](#)
- [Holiday feet](#)
- [Foot care advice \(Moderate Risk\)](#)

Print Options

- [Create PDF](#)
- [Print this page](#)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)

[Top of page](#)

My Diabetes My Way - Die x

www.mydiabetesmyway.scot.nhs.uk/resources/footcare/advice/moderate.asp?thes

should test the temperature of the water with your elbow, or ask someone else to test the temperature for you.

Moisturise your feet every day
If your skin is dry, apply a moisturising cream every day, avoiding the areas between your toes.

Toenails
Cut or file your toenails regularly, following the curve of the end of your toe. Use a nail file to make sure that there are no sharp edges which could press into the next toe. Do not cut down the sides of your nails as you may create a 'spike' of nail which could result in an ingrown toenail.

Socks, stockings and tights
You should change your socks, stocking or tights every day. They should not have bulky seams and the tops should not be elasticated.

Avoid walking barefoot
If you walk barefoot you risk injuring your feet by stubbing your toes and standing on sharp objects which can damage the skin.

Check your shoes
Check the bottom of your shoes before putting them on to make sure that nothing sharp such as a pin, nail or glass has pierced the outer sole. Also, run your hand inside each shoe to check that no small objects such as small stones have fallen in.

Badly-fitting shoes
Badly-fitting shoes are a common cause of irritation or damage to feet. The professional who screened your feet may give you advice about the shoes you are wearing and about buying new shoes.

Minor cuts and blisters
If you check your feet and discover any breaks in the skin, minor cuts or blisters, cover them with a sterile dressing. Do not burst blisters. Contact your podiatry department or GP immediately.

Over-the-counter corn remedies
Do not use over-the-counter corn remedies. They are not recommended for anyone with diabetes as they can cause damage to the skin that can create problems.

Hard skin and corns
Do not attempt to remove hard skin or corns yourself. Your podiatrist will provide treatment and advice where necessary.

Avoid high or low temperatures
If your feet are cold, wear socks. Never sit with your feet in front of the fire to warm them up. Always remove hot water bottles or heating pads from your bed before getting in.

If you discover any problems with your feet, contact your local podiatry department or GP for advice immediately.

[View the pdf version of this leaflet](#)

Rate this Page

Poor 1 2 3 4 5 Excellent

Any comments you have

Send

Share this page:

f

about us | contact us | acknowledgements

top of page





my preferences | logout

my details | my lifestyle | my results | my eyes | my feet | my medication | my diary | my letters | my goals | my recordings | my summaries

ARCHIBALD MACKIE

My Medication

Date	Drug Name	Preparation	Dose	Quantity
29/01/2016	Bendroflumethiazide (Bendrofluazide)	TABS 2.5MG	1 Tab	56
29/01/2016	Losartan Potassium	TABS 50MG	1 Tab	56
29/01/2016	Doxazosin Mr	TABS 4MG	1 Tab	56
29/01/2016	Candesartan Cilexetil	TABS 16MG	1 Tab	56
29/01/2016	Aspirin	Dispersible TABS 75MG	1 Tab	56
27/01/2016	Nuseals Aspirin	Ec TABS 75MG	1 TAB	56 tabs
27/01/2016	Doxazosin	TABS 4MG	1 Tab	56
27/01/2016	Candesartan Cilexetil	TABS 16MG	1 Tab	56
27/01/2016	Bendroflumethiazide (Bendrofluazide)	TABS 2.5MG	1 Tab	56
27/01/2016	Atenolol	TABS 50MG	1 Tab	56
27/01/2016	Aspirin	Dispersible TABS 75MG	1 Tab	56
27/01/2016	Alphosyl 2 In 1	Shampoo	Apply	125
27/01/2016	Bendroflumethiazide (Bendrofluazide)	TABS 2.5MG	1 Tab	84
26/01/2016	Losartan Potassium	TABS 25MG	1 Tab	28
25/01/2016	Losartan Potassium	TABS 25MG	1 Tab	56
24/01/2016	Alphosyl 2 In 1	Shampoo	Apply	125
23/01/2016	Doxazosin Mr	TABS 4MG	1 Tab	56
23/01/2016	Atenolol	TABS 50MG	1 Tab	56
23/01/2016	Candesartan Cilexetil	TABS 16MG	1 Tab	84
23/01/2016	Bendroflumethiazide (Bendrofluazide)	TABS 2.5MG	1 Tab	84
23/01/2016	Atenolol	TABS 50MG	1 Tab	84
23/01/2016	Aspirin	Ec TABS 75MG	1 Tab	84
22/01/2016	Clarithromycin Mr	TABS 500MG	1 Tab	7
20/01/2016	Doxazosin	TABS 2MG	1 Tab	56
20/01/2016	Candesartan Cilexetil	TABS 16MG	1 Tab	56
20/01/2016	Bendroflumethiazide (Bendrofluazide)	TABS 2.5MG	1 Tab	56

My Links

- Reviewing your diabetes
- Hands on Insulin
- Treatment of Diabetes
- Smoking and Diabetes

Print Options

- Create PDF
- Print this page

ARCHIBALD MACKIE

My Medication

Date	Drug Name
29/01/2016	Bendroflu
29/01/2016	Losartan P
29/01/2016	Doxazosin
29/01/2016	Candesarta
29/01/2016	Aspirin
27/01/2016	Nuseals As
27/01/2016	Doxazosin
27/01/2016	Candesarta
27/01/2016	Bendroflu
27/01/2016	Atenolol
27/01/2016	Aspirin
27/01/2016	Alphosyl 2
27/01/2016	Bendroflu
26/01/2016	Losartan P
25/01/2016	Losartan P
24/01/2016	Alphosyl 2
23/01/2016	Doxazosin
23/01/2016	Atenolol
23/01/2016	Candesarta
23/01/2016	Bendroflu
23/01/2016	Atenolol
23/01/2016	Aspirin
22/01/2016	Clarithromy
20/01/2016	Doxazosin
20/01/2016	Candesartan Cilexetil
20/01/2016	Bendroflumethiazide (Bendrofluazide)

Simvastatin - Simvador, Zocor. Cholesterol level medication | Patient - Google Chrome

patient.info/medicine/simvastatin-simvador-zocor

Article

Related

Support

Discuss

About simvastatin

Type of medicine

A lipid-regulating medicine commonly known as a statin

Used for

Lowering cholesterol and other lipids in the blood; to reduce the risk of heart and blood vessel disease

Also called

Simvador®; Zocor®; and Inegy® (a combination of simvastatin with a medicine called ezetimibe)

Available as

Tablets and oral liquid medicine

Lipids, or fats, are made naturally in your body from the food you eat. They are easily stored in your body and serve as a source of energy. [Cholesterol](#) and triglycerides are types of lipid. If the concentration of these lipids in your blood becomes too high, it leads to a condition called [hyperlipidaemia](#). If it is the concentration of cholesterol which has become too high, it is called [hypercholesterolaemia](#). Although a high blood concentration of lipids will not make you feel ill, it can cause a problem if it is left untreated.

People with high lipid levels can develop small fatty patches called [atheroma](#). These patches develop when excess fat is deposited on to the walls of blood vessels. Over time, these patches can make a blood vessel narrower and this is called atherosclerosis (sometimes referred to as 'hardening of the arteries'). The narrowing reduces the blood flow through the artery and increases the risk of a number of heart and blood vessel diseases, such as [heart attack](#) and [stroke](#).

20/01/2016	Doxazosin	TABS 2MG	1 Tab	56
20/01/2016	Candesartan Cilexetil	TABS 16MG	1 Tab	56
20/01/2016	Bendroflumethiazide (Bendrofluazide)	TABS 2.5MG	1 Tab	56

My Links

- Reviewing your diabetes
- Hands on Insulin
- Treatment of Diabetes
- Smoking and Diabetes

Print Options

- Create PDF
- Print this page



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

Care Measures Summary

Patient Name:	ARCHIBALD MACKIE	Address:	A RESIDENCE, SOMEWHERE IN TAYSIDE, DUNDEE
Date of Birth:	29/05/1932	CHI Number:	290532V[DC
Type of Diabetes:	Type 1	Year of Diagnosis:	1995

Print Options



[Create PDF](#)



[Print this page](#)

There's a minimum level of care that every person who has diabetes deserves and should expect from their health service. Getting all the checks, seeing the right healthcare professionals and understanding your diabetes are all essential in helping you manage your condition. Use this checklist to make sure you're getting all the care you need.



Get your blood glucose levels measured. 4.0 mmol/L on 27/02/2014

You should have an annual HbA1c blood test to measure your overall blood glucose control. Although there are recommended targets, no two people with diabetes are the same and your target should have been agreed by you and your diabetes healthcare team.



Have your blood pressure measured. 130/80 mmHg on 05/02/2016

You should have your blood pressure taken and recorded at least once a year. There are recommended targets but you should have a target that is right for you.



Have your blood fats (cholesterol) measured. 4.5 mmol/L on 27/02/2014

You should have an annual blood test to measure your cholesterol level. Like blood glucose and blood pressure, you should have your own target that is realistic and achievable.



Have your eyes looked at. 07/01/2016

You have the right to have your eyes screened for signs of retinopathy every year. Using a specialised digital camera, a photo of your eyes is taken and examined by a specialist who is looking for any changes to your retina (the seeing " part at the back of your eye).



Have your legs and feet checked. Moderate Risk on 27/01/2016

The skin, circulation and nerve supply of your legs and feet should be examined annually. If there is any risk to your limbs, you should be referred to a podiatrist or a specialist foot clinic.



Have your kidney functions monitored. > 68 ml/min on 20/01/2016

You should have two tests for your kidneys each year. A urine test checking for protein - a sign of possible kidney problems - and a blood test measuring the rate at which blood is filtered by the kidneys.















Have your weight checked. 74kg (11st 10lb) on 25/01/2016

You should be weighed and have your waist measured to see if you need to lose weight.


my details | my lifestyle | my results | my eyes | my feet | my medication | my diary | my letters | my goals | my recordings | my summaries

ARCHIBALD MACKIE

My Data Trends

Result	Previous result	Current result	Change	Comment	Full history
 HbA1c	48 (6.5%) on 12/07/2008	36 (5.4%) on 17/11/2011	-12 	Your HbA1c has decreased since your last measurement and is on target - Click here to find out how to maintain your healthy level.	
 Body Mass Index	25.6 kg/m ² on 04/10/2014	27.3 kg/m ² on 20/11/2014	1.7 	Your weight is 74 Kg . Your ideal weight based on your height is between 53 Kg and 71 Kg . Your body mass index (BMI) is above target (overweight) and is higher than your last result. Losing weight will reduce your risk of diabetes complications. - Click here to find out how to maintain a healthy level.	
 Waist Circumference	100cm on 02/02/2015	84cm on 20/02/2015	-16 	Your Waist circumference is normal and lower than last result - Click here to find out how to maintain a healthy level.	
 Blood Pressure	120/80 mmHg on 17/02/2014	180/70 mmHg on 24/03/2014	60 	Your blood pressure is significantly above target and is higher than your last result. Keeping your BP in target will reduce your risk of heart attack, stroke & kidney problems. If your blood pressure is regularly above target you should discuss your medication with your health care provider - Click here to find out how to maintain a healthy level.	
				Your Cholesterol is slightly above target but lower than your last	

Print Options



Create PDF



Print this page



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

Information Links For HbA1c

[Return to my data trends summary](#)

HbA1c is an important measure of your overall sugar level over the last 2-3 months. Ideally this should be somewhere between 48 -58 mmol/mol (6.5 – 7.5%). For type 2 diabetes, sugar levels can be improved by regular exercise, maintaining a normal body weight, eating a healthy balanced diet, avoiding high sugar foods and taking any diabetes medication regularly. If HbA1c remains above target despite this, you should discuss with your health care provider whether your medication needs changed. For people with type 1 diabetes, it is important to balance the amount of insulin with your food (carbohydrate) intake and activity levels.

The higher your HbA1c is above target, the greater your risk of diabetes complications affecting kidney, eyes, feet and heart.

Self-monitoring of blood glucose is a beneficial part of diabetes management for some people. Blood glucose levels in people without diabetes are 3.5–5.5mmol/L before meals and less than 8mmol/L 2 hours after meals. People with diabetes often have targets around 5-7mmol before meals (lower in pregnancy).

Want more information?

[What is HbA1c?](#)

[Healthy eating](#)

[10 steps to eating well](#)

[Monitoring Diabetes](#)

[Diabetes Complications](#)

[Hypoglycaemia \(low blood sugars\)](#)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)

[Top of page](#)



my preferences | logout

my details | my lifestyle | my results | my eyes | my feet | my medication | my diary | my letters | my goals | my recordings | my summaries

ARCHIBALD MACKIE

My Goals Summary

Setting goals is a good way of focusing on specific aspects of your health that you wish to improve.

Here is a summary of the goals you have set yourself, with achievement dates. Try to set goals that are realistic and review and revise your goals regularly. Sharing your goals with your health care team and friends and family can help provide the support and knowledge you need to make these positive changes.

Good Luck!!

Print Options

Create PDF

Print this page

Result	Current Result	Goal	
HbA1c	36.0 mmol/mol (5.4%) on 17/01/2016	No goal set	Set goal
Blood glucose	4.0 mmol/L on 27/02/2014	4.0 mmol/L by 01/09/2016	Amend goal
Cholesterol	4.5 mmol/L on 27/02/2014	4.4 mmol/L by 27/04/2016	Amend goal
Blood pressure	130/80 mmHg on 05/02/2016	130/90 mmHg by 01/06/2016	Amend goal
Weight	74kg (11st 10lb) on 25/01/2016	No goal set	Set goal
Waist circumference	90cm on 17/02/2016	No goal set	Set goal
Smoking status	Current smoker on 03/02/2016	No goal set	Set goal
Cigarettes per day	Smoking 21 cigarettes per day on 03/02/2016	Reducing cigarettes to a maximum of 5 per day by 01/09/2016	Amend goal



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

Manage My Blood Glucose Goal

Maintaining blood glucose levels as close to the normal range as possible, and reducing large swings in blood glucose is important. Good blood glucose control will reduce your risk of long term complications but also help you maintain good energy levels and a positive mood.

Current result: 4.0 mmol/L on 27/02/2014

Suggested goal:

These blood glucose targets below are a rough guide. Your own health care professionals may give you a different target depending on your age, type of diabetes and medication. Pre-meal or fasting blood glucose levels will be lower than blood glucose levels checked after meals.

Add or amend Your goal

Blood glucose: mmol/L

Timescale:

Comments:

Your current goal

Your goal: 4.0 mmol/L by 01/09/2016

Your comments: Reducing my Blood Glucose goal

Clinical guidelines

Your clinician would normally aim to have your Blood Glucose between 4 and 8

Set goal

Back to goals summary

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)

[Top of page](#)

[my preferences](#) | [logout](#)[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)**ARCHIBALD MACKIE****Contact Your Diabetes Team**

Please use this page to ask us a question or to view history of your current questions.

You can also use it to report any technical problems you are having with the website. If you notice that there is something wrong with your information, or it is not updating, then we will get back to you as soon as we can.

Please note: *this service is for non-urgent clinical queries.* You should expect to receive a response within 3 working days. If you have an urgent medical problem then please contact your medical team by telephone.

Ask a new question

Subject	Status	Amended on
Diasend Upload software	Opened	01/03/2016 (14:26)
HBA1c	Read	01/03/2016 (14:25)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)[Top of page](#)

Ask A New Question

Close

Type of question:

A question about my clinical data ▼

Subject:

HbA1c

My question:

How does HbA1c return an accurate average measurement of average blood glucose?

79 / 5000 characters

Send



[my preferences](#) | [logout](#)

[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)

ARCHIBALD MACKIE

Your conversation for the question "HBA1c"

[Add reply / more information](#) [Back to your questions](#)

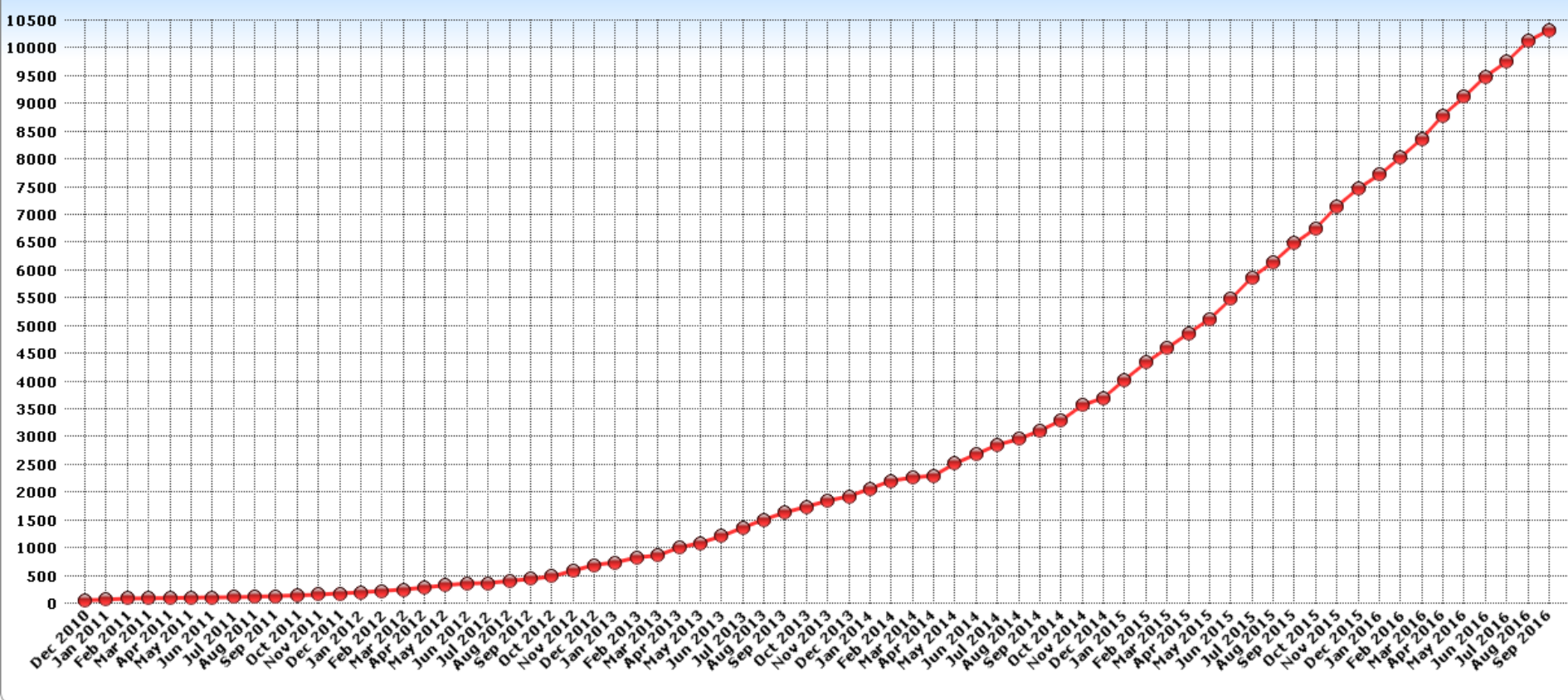
Message	Amended on
When the body processes sugar, glucose in the bloodstream naturally attaches to haemoglobin. The amount of glucose that combines with this protein is directly proportional to the total amount of sugar that is in your system at that time. Because red blood cells in the human body survive for 8-12 weeks before renewal, measuring glycated haemoglobin (or HbA1c) can be used to reflect average blood glucose levels over that duration, providing a useful longer-term gauge of blood glucose control. If your blood sugar levels have been high in recent weeks, your HbA1c will also be greater.	01/03/2016 (14:25)
How does HBA1c return an accurate average measurement of average blood glucose?	01/03/2016 (14:23)

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)

[Top of page](#)

Records Access – Current Status

- 10,312 people have accessed their records



Evaluation

- Survey – opinions following system use:
 - 87% - reminders of information discussed
 - 89.6% - better use of consultation time
 - 94.2% - improved understanding
 - 95.9% - helped to monitor changes over time
 - 88.2% - helped manage diabetes better
- Significant improvements in outcomes:
 - HbA1c ($p < 0.001$) 1.53 mmol/mol
 - Total cholesterol ($p=0.002$); HDL ($p=0.012$); LDL ($p=0.001$); Diastolic BP ($p=0.007$); weight ($p=0.003$)

Anecdotal Feedback

- *The knowledge provided helps me **understand the normal parameters** and where I stand/can improve...*
- *more information available to me means I can **play a more positive role** in my treatment...*
- *Great site and like having the long term history available to **put current results in perspective**...*
- *It is great to be able to view all of my results so that **I can be more in charge of my diabetes**...*
- *What a fab resource, **wish we had this in @NHSEngland***

What's Next?

- Further Developments
 - Parent and carer access
 - eLearning modules – in pilot
 - Smartphone App
 - Virtual clinics
 - Data integration and analytics
 - Notifications and alerts

My Test Results - Windows Internet Explorer

http://icetest.dundee.ac.uk/nasome/smart/testresults.aspx

File Edit View Favorites Tools Help

X Windows Live Bing What's New Profile Mail Photos Calendar MSN Share Sign in

Favorites Script all data of a table - S... Get More Add-ons Suggested Sites Profile

My Test Results

*mydiabetes * myway*
... the interactive diabetes website

NHS SCOTLAND

[logout](#)

[my personal details](#) | [my lifestyle](#) | [my test results](#) | [my eye screening](#) | [my foot screening](#) | [my medication](#) | [my diary](#) | [my correspondence](#)

ARCHIBALD MACKIE

My Test Results

HbA1c: 5.4 on 17 Nov 2004 [view my HbA1c history](#)

Blood Pressure: 134/76 mmHg on 05 Nov 2003 [view my Blood Pressure history](#)

Total Cholesterol: 3.8 mmol/L on 17 Nov 2004 [view my Total Cholesterol history](#)

Creatinine: 88.0 mmol/L on 17 Nov 2004 [view my Creatinine history](#)


[view my Target Chart](#)

Personal Knowledge Links

[What Care to Expect](#)

[Blood Sugar Testing](#)

Virtual Clinic Link Up



[feedback](#) | [frequently asked questions](#)

On- Line Groups:

Carb Counting in Type 1 Diabetes – Discussion Forum

LIVE CHAT:

Diabetes Nurse:

How's things?

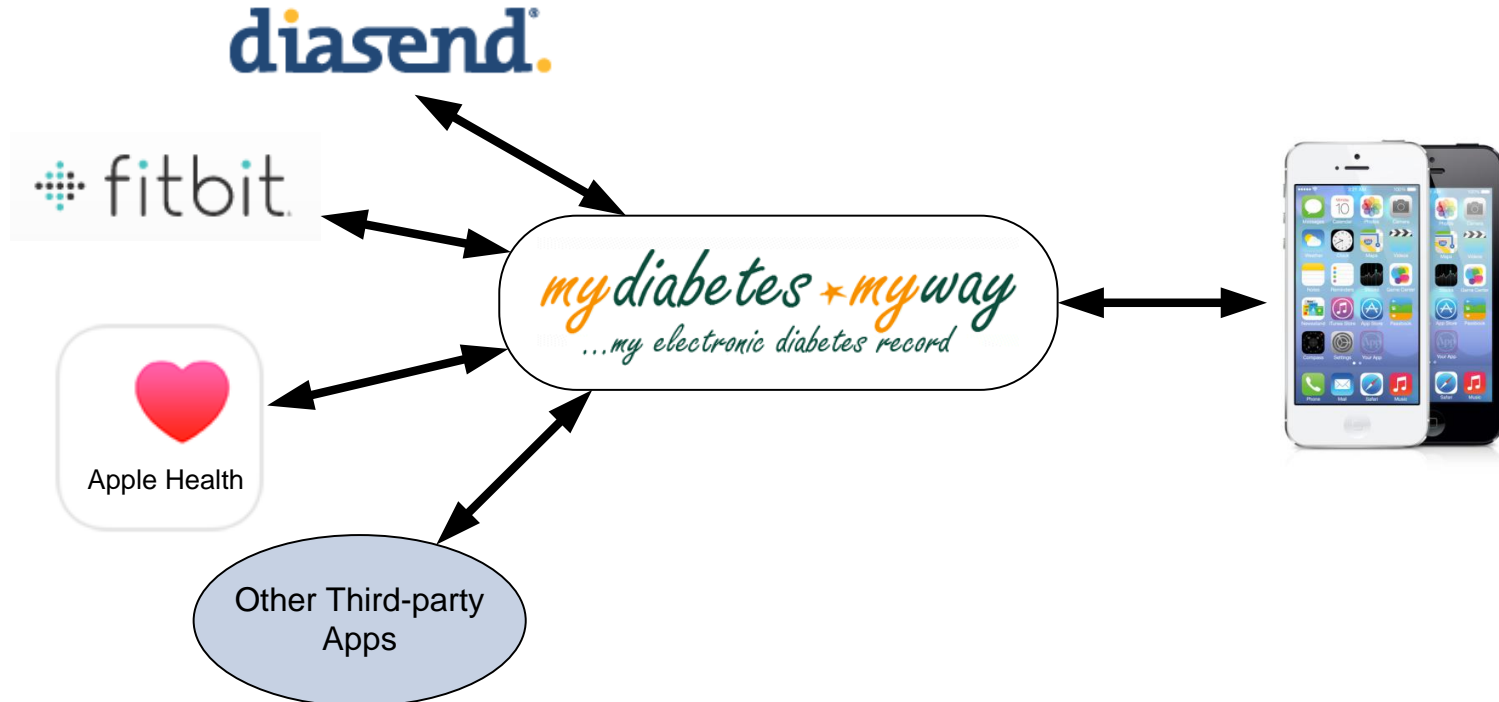
AM: Here's My sugar levels today

0900- 4.4, 12.00- 5.2, 1600- 7.1,

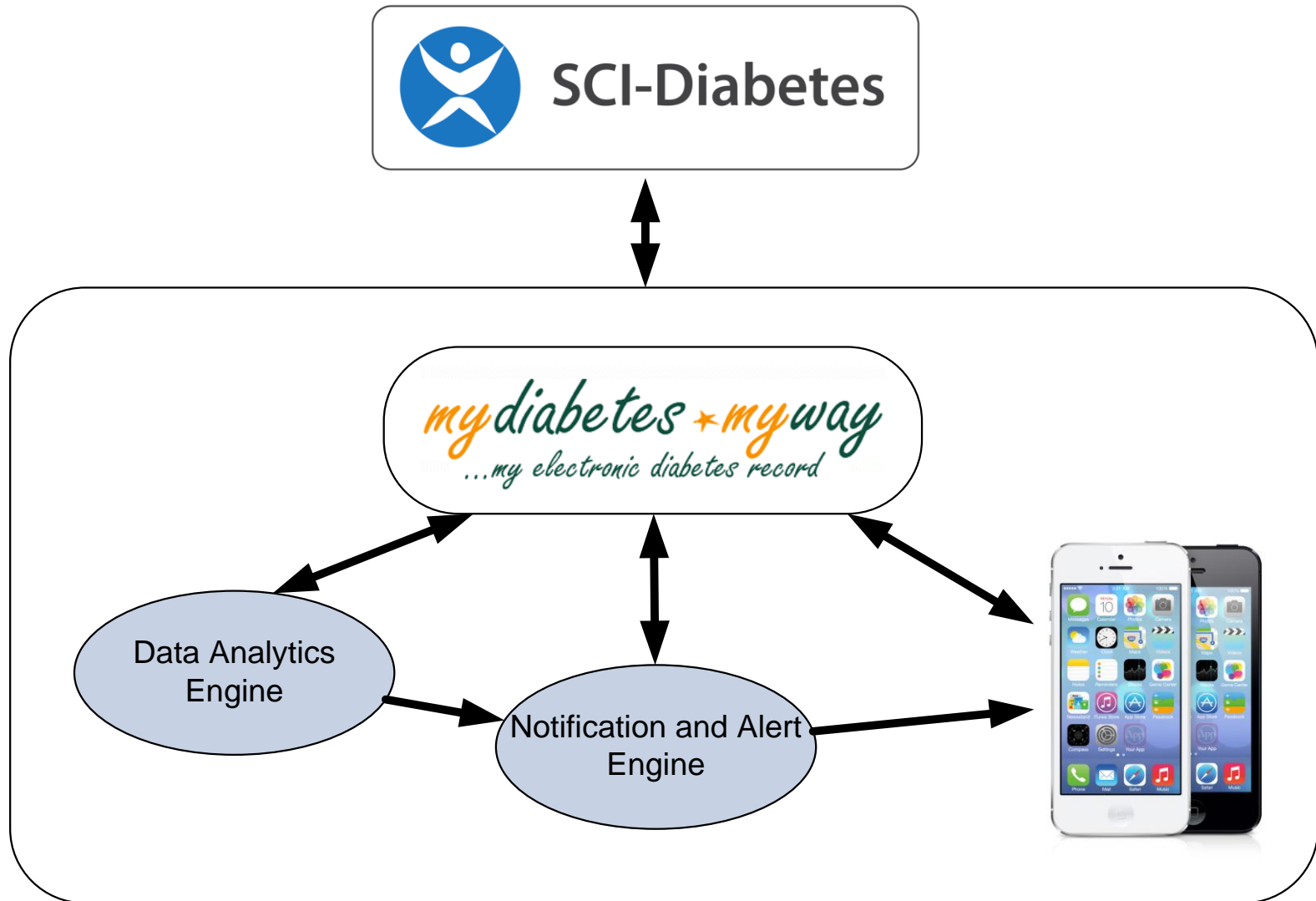
What do you think?

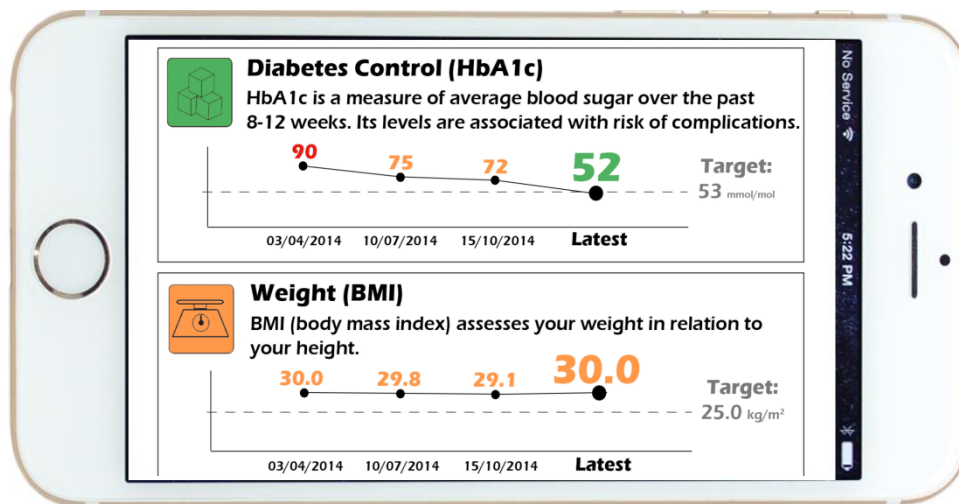
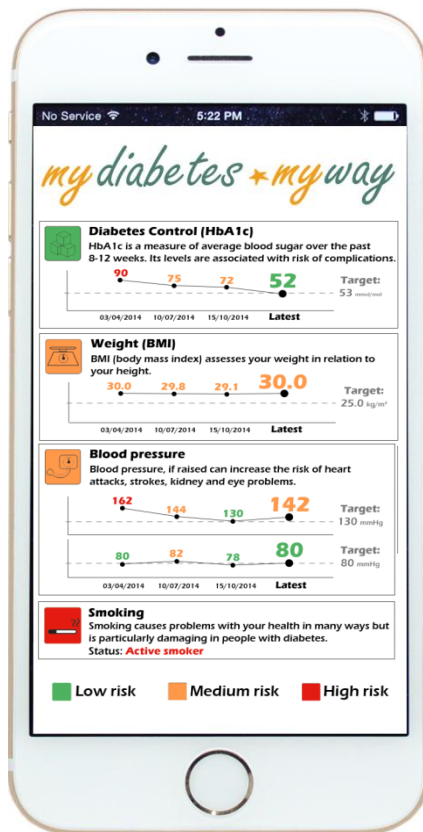
Patient-recorded Data

- Mobile: >1,300 diabetes apps!
- Wearable technology: pumps, CGM, activity
- Home monitoring: BG, BP, weight, CHO



Patient-recorded Data





Raising Awareness

- Primary Care Mailout
 - List of unregistered patients supplied
 - Review to exclude inappropriate patients
 - Letter sent out on practice headed paper
 - All postage and stationery paid by MDMW

[my preferences](#) | [logout](#)[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#) | [my letters](#) | [my goals](#) | [my recordings](#) | [my summaries](#)



ARCHIBALD MACKIE

My Recordings

In future, we plan to make your home-recorded results available to your health care teams to assist them in better managing your condition. At present, these results are not routinely reviewed, so if you have any concerns or questions, please contact your regular care provider


You are currently recording your Blood Glucose. [Click to change](#)

? Enter your Blood Glucose recording in mmol/L

? Enter the date and time the recording was made  

[Contact your diabetes team](#) | [Discussion forum](#) | [frequently asked questions](#)[Top of page](#)

(*) means that the fields are compulsory

[Collapse registration form](#) [Print to PDF](#) 

Name

First name (*)

Gerald

Last name (*)

Brady

Personal ID

EMR Patient Id

EMR Destination

No EMR destination ▼

Personal details

Address

A residence somewhere

Home phone

Mobile

E-mail

gbrady@somemail.net

Work phone

User name of the patient (unique identification)

☒ Allow patient to log in to the diasend® system and view reports.

The patient needs to be registered with a unique identification in the diasend® system. If the patient wants to log in to diasend® and see the data he/she could use this user name and password. The password must have at least 8 characters.

User name

Gbrady_01

Enter new password

Repeat new password



[my details](#) | [my lifestyle](#) | [my results](#) | [my eyes](#) | [my feet](#) | [my medication](#) | [my diary](#)

JUSTA TEST

My Preferences

These are your preferences - you can change them at any time.

Email address: mydiabetesmyway@nhs.net **Email address verified** - [change](#)

You are **not subscribed** to the "My Diabetes My Way" newsletter - [change](#)



Manage your "myaccount" username - [change](#)

Manage your "myaccount" password - [change](#)



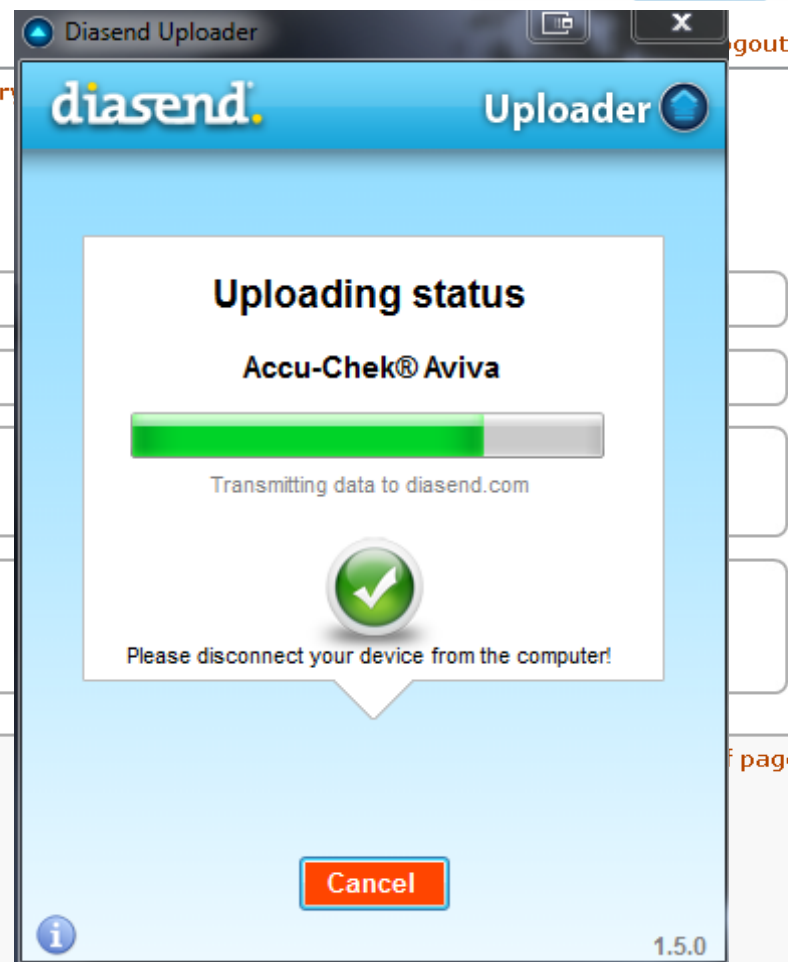
Diasend Uploader
for Windows



Diasend Uploader
for Mac OS X (10.5.7 or later)



[feedback](#) | [frequently asked questions](#)



Joe Blogg

EMR PDF 

Information from glucose and/or CGM device is available from the period: 14/03/2014 - 24/02/2016

Glucose

CGM

Insulin

Comparison

Compilation

Patient profile

Logbook/table

Standard day

Trend

Day by day

Meter alarms


Meter settings

Period: 12/02/2016 - 25/02/2016, 14 days



Select time interval ▼

☒ Include manually entered records

mmol/L

[Hide color](#)[Compress values](#)[Print to PDF](#) 

	00:00	01:00	02:00	03:00	04:00	05:00	06:00	07:00	08:00	09:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	Daily totals
Fri 12/2									7.5																Average (1): 7.5mmol/L
Sat 13/2										6.4															Average (1): 6.4mmol/L
Sun 14/2											5.6														Average (1): 5.6mmol/L
Mon 15/2												6.0													Average (1): 6mmol/L
Tue 16/2									4.9																Average (1): 4.9mmol/L
Wed 17/2										5.5															Average (1): 5.5mmol/L
Thu 18/2									5.7																Average (1): 5.7mmol/L
Fri 19/2									4.3																Average (1): 4.3mmol/L
Sat 20/2											6.3														Average (1): 6.3mmol/L
Sun 21/2											4.8								3.7						Average (3): 4.3mmol/L
																			4.4						
Mon 22/2											7.2														Average (1): 7.2mmol/L
Tue 23/2											5.8														Average (1): 5.8mmol/L
Wed 24/2											7.4														Average (1): 7.4mmol/L
Thu 25/2																									Average (0): --

 <4 mmol/L  Within  > 10 mmol/L *m* tagged values were typed in manually by the patient

Number of values: 15

Values per day: 1.1

Period average (mmol/L): 5.7

Values above goal (10 mmol/L): 0

Values within goal (4-10 mmol/L): 14

Values below goal (4 mmol/L): 1

Highest value (mmol/L): 7.5 (12/02/2016 08:33)

Lowest value (mmol/L): 3.7 (21/02/2016 18:08)

Standard deviation: 1.1

Comments ([Show](#))

my diabetes ★ my way

Dr Scott G Cunningham, Technical Consultant
scott.cunningham@nhs.net

www.sci-diabetes.scot.nhs.uk

www.mydiabetesmyway.scot.nhs.uk

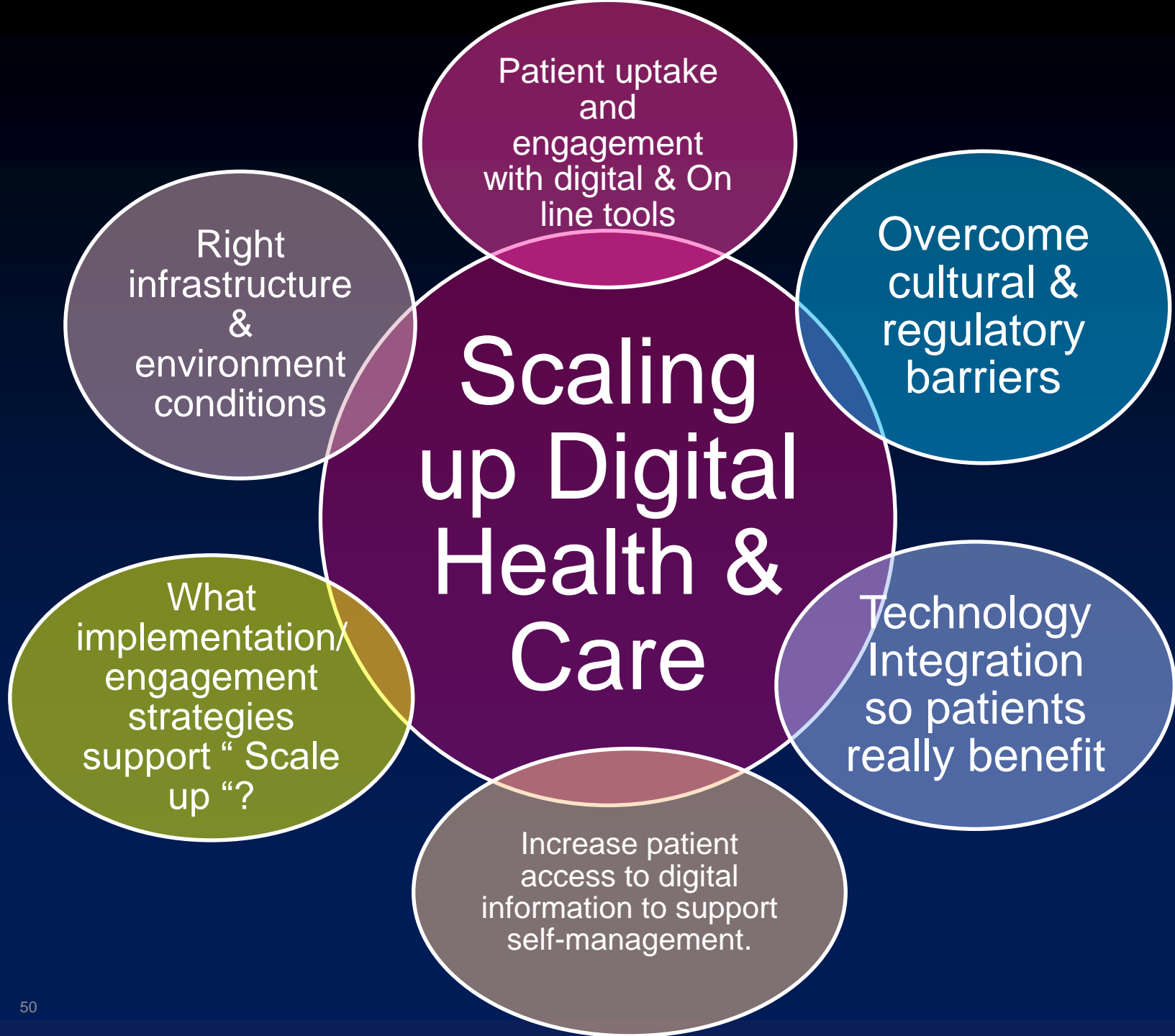
 **@MyDiabetesMyWay**

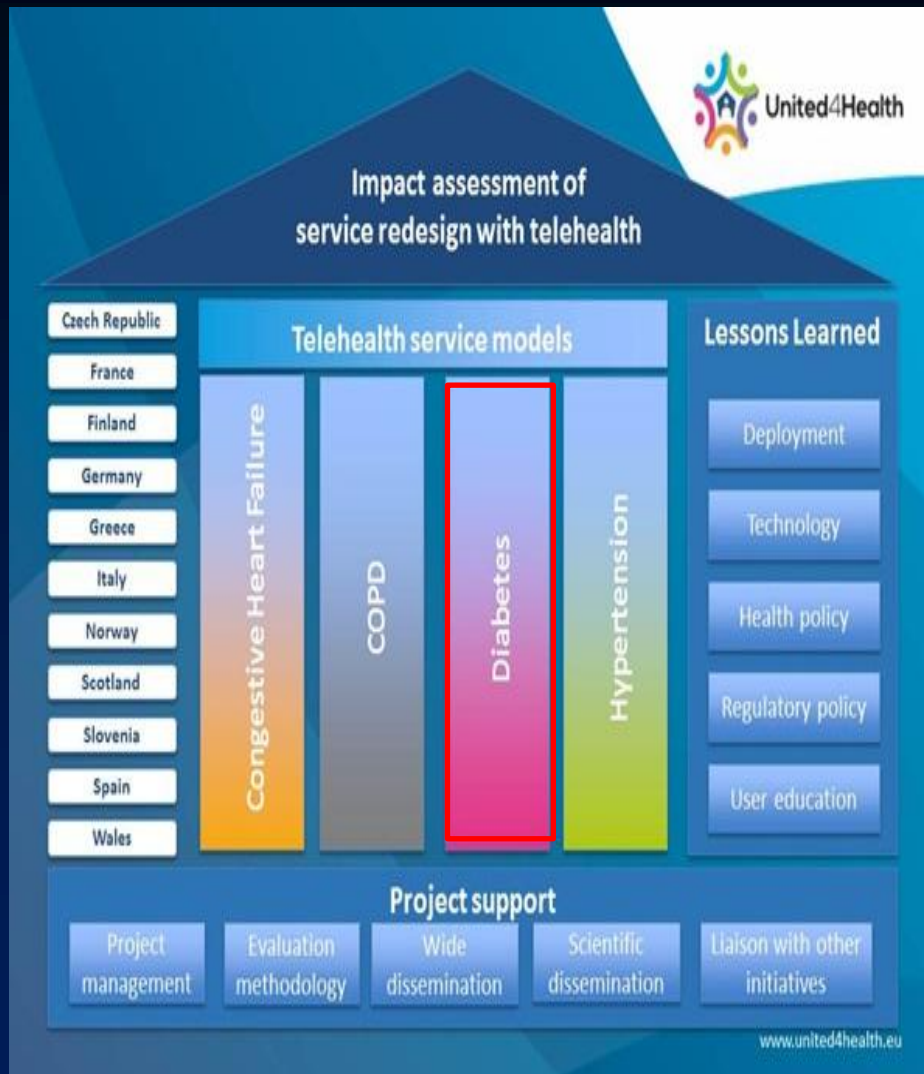
 **www.facebook.com/mydiabetesmyway**

Scaling up in Routine care - Technology to support Self Management

- potential to increase provider productivity, deliver cost savings, reduce avoidable service use and improve health outcomes
- Digital technologies can empower patients and carers by giving them more control over their own health & increase patient “ activation” levels *
- Targeted appropriately support Improvements in HBA1c, self efficacy *
- Wide scale adoption of TEC will be essential for sustainability of future health and care services

** References : How digital technology is transforming health and social care (Deloitte Report, 2015) ;
The Kings Fund, 2015 , Self Management & Patient Activation .*





Support and facilitate the redesign and delivery of services through digital Home Health monitoring

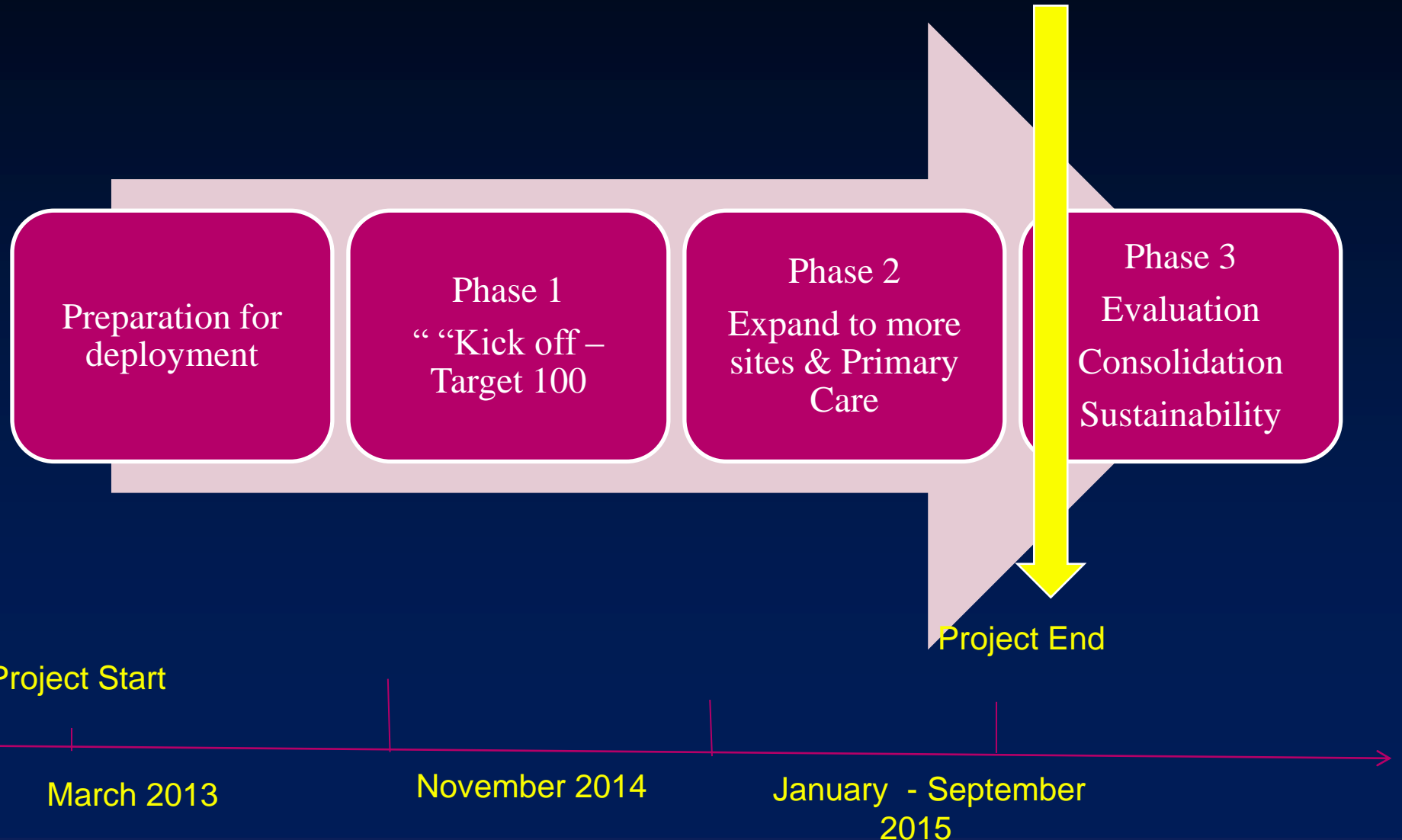
Large Scale Deployment in routine care

- Clinical & Economic Impacts
- Critical Success Factors for scale up

NHS 24/SCTT lead co-ordinator across consortium with 14 regions & 34 partners

www.united4health.eu

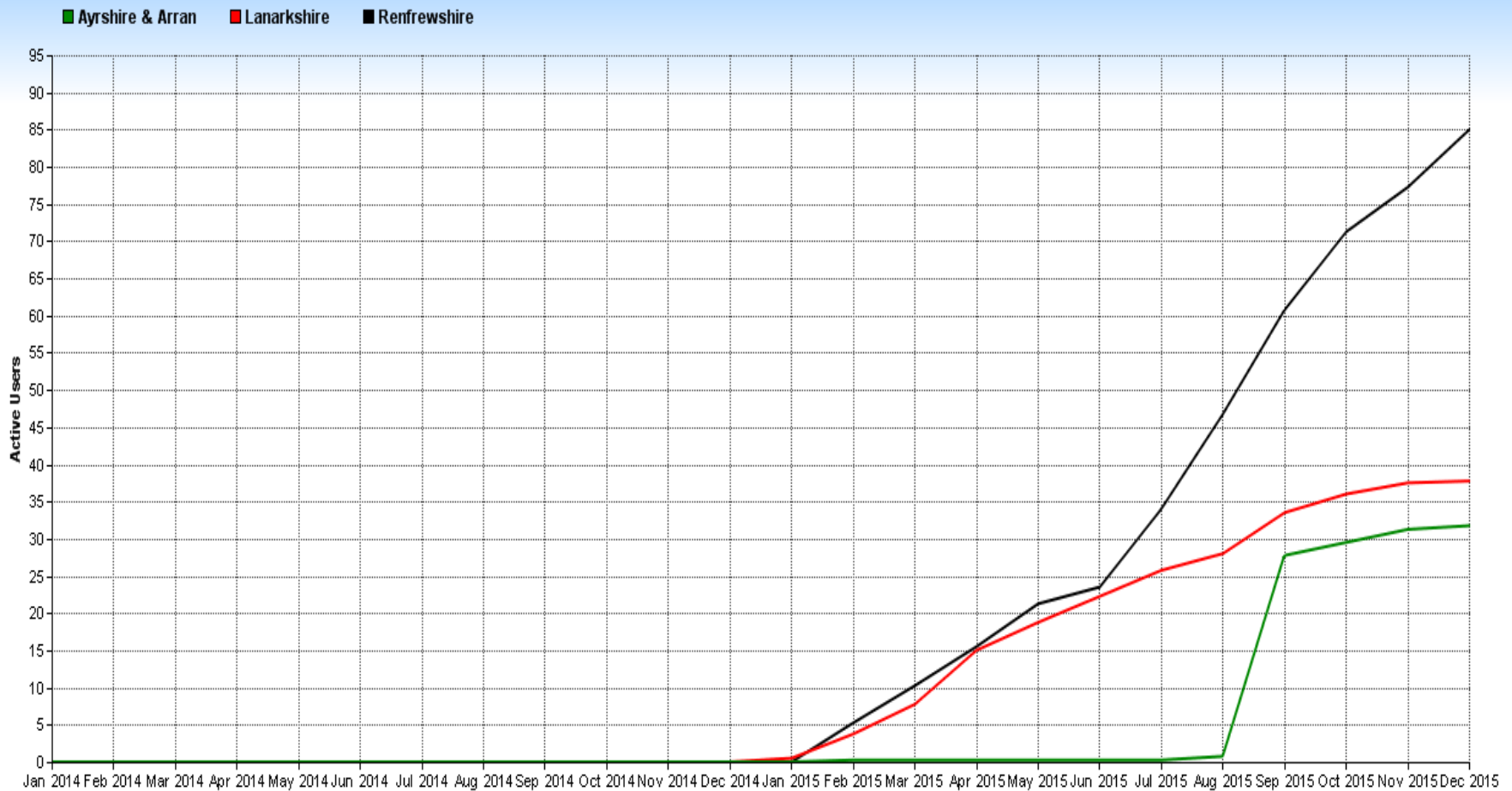
NHS 24/ SCTT led a collaboration with 3 Health Board Regions, Diabetes Clinical Leads, SCI Diabetes



Active MDMW Users: Scotland v U4H



U4H Diasend: % of Target



U4H EU Findings (unpublished) so far.....

- Tele-monitoring in Diabetes can be deployed into routine care at scale
- Clinical Effectiveness - Improved Diabetes control
- Patient Satisfaction - Positive patient response
- Fewer face to face GP/Consultant consultations – shift more self management
- Lower hospital admission rates

Critical Success Factors

- Technology - to meet changing needs of population (Smart phone v laptop)
- Effective integration through service redesign
- Clinical Leadership at early stage
- More about people than technology
- More co-design with service users.

What next ?

- Growing Diasend and MDMW registrations – uptake issues
- SCI DC improve BGM monitoring functionality
- Benefits Realisation / Evaluation/ Sustainability
- Policy Mandate to accelerate spread across Scotland of Digital remote monitoring through National TEC programme

Video clip

- Diasend – Clinician & Patient Prospective.
- <https://youtu.be/6NhytEiRQDo>

Thank You

Any Questions ?