Blood Glucose Testing Strips Review – Additional Information

The aim of this review is to reduce prescribing cost for blood glucose testing strips (BGTS) by 10% (baseline data September 2014, measuring data January 2015).

This can be undertaken in a number of ways, which include the following:

1. **Reviewing all patients using BGTS with a view to changing to a less costly strip and more cost effective meter.**

<table>
<thead>
<tr>
<th>Formulary Meters and Testing Strips (in order of cost)</th>
<th>Cost of 50 strips (September 2014)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GlucoRx Nexus &amp; GlucoRx Nexus Mini / GlucoRx Nexus Strips</td>
<td>£9.95</td>
</tr>
<tr>
<td>Accu-chek Aviva &amp; Aviva Nano / Accu-chek Aviva Strips</td>
<td>£15.72</td>
</tr>
<tr>
<td>BGstar / BGstar test Strips</td>
<td>£14.73</td>
</tr>
<tr>
<td>Contour XT / Contour Next Strips</td>
<td>£14.85</td>
</tr>
</tbody>
</table>

**Benefits of using formulary cost effective meters (e.g. GlucoRx Nexus)**

- All meters comply with International Organisation for Standardisation (ISO).
- GlucoRx meter is available as standard, mini meter and talking meter.
- Support to practices (including supplying meters) is usually provided by all pharmaceutical companies. Contact details can be found in the Wirral Blood Glucose Monitoring at Home Guidelines
  
- Undertaking switches to the more cost effective meters is a good opportunity to review patients’ use of blood glucose testing strips according to the guidelines.

2. **Reviewing patients to ensure that they follow the Wirral Blood Glucose Monitoring at Home Guidelines to reduce unnecessary prescribing.**

Patients (being prescribed BGTS) to be reviewed would include all type 2 diabetic patients NOT being prescribed any of the following:

- Insulin
- GLP-1 analogues
- Glinides (including repaglinide)
- Sulfonylureas (NB: patients may still be reviewed by following the information found in the Wirral Blood Glucose Monitoring at Home guidelines)

These patients should be reviewed to ensure that the quantity of BGTS and the frequency of monitoring follows the guidelines (for stable patients). By limiting the quantity of BGTS and/or frequency of monitoring a reduction in prescribing cost could be achieved.

BGTS wastage will be reduced if prescription staff only issue prescriptions for testing strips if they have been asked for by name. Test strips should not go onto repeat prescription as there is a risk that they could be issued unnecessarily. Practices should consider if their standard practice is that BGTS are issued as an acute prescription only. Patients should be encouraged to test appropriately...
by adding directions onto test strips and for this to be discussed when they attend the practice, both for medical appointments and their annual diabetic review.

**DVLA Guidance**²
When reviewing BGTS being prescribed for a type 2 diabetic, please be aware of the following information from the DVLA.

**Insulin Treated patients:**

**Group 1 entitlement ODL – car, motorcycle**
Patient should have access to appropriate blood glucose testing and test no more than 2 hours before the start of the first journey and every 2 hours while driving.

**Group 2 entitlement vocational – lorries, buses**
Patient must regularly monitor blood glucose at least twice daily and at times relevant to driving, (no more than 2 hours before the start of the first journey and every 2 hours while driving), using a glucose meter with a memory function to measure and record blood glucose levels. More frequent testing may be required if for any reason there is a greater risk of hypoglycaemia for example after physical activity or altered meal routine. At the annual examination by an independent Consultant Diabetologist, 3 months of blood glucose readings must be available. These patients are:

- advised to use a modern blood glucose meter which has a memory chip
- must demonstrate an understanding of the risks of hypoglycaemia

**Diabetes - Managed by tablets which carry a risk of inducing hypoglycaemia (this includes sulfonylureas and glinides)**

**Group 1 entitlement ODL – car, motorcycle**
For these patients it may be appropriate to monitor blood glucose regularly and at times relevant to driving to enable the detection of hypoglycaemia.

**Group 2 entitlement vocational – lorries, buses**
These patients should regularly monitor blood glucose at least twice daily and at times relevant to driving.

**References**

### Summary – Blood Glucose Testing Strip Review

Practice name……………………………………………….

<table>
<thead>
<tr>
<th><strong>Summary of Actions</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>Number of patients being prescribed BGTS (and eligible for review)</strong></td>
</tr>
<tr>
<td><strong>Number of patients:</strong></td>
</tr>
<tr>
<td>a) Changed to cost effective alternative meter and strips</td>
</tr>
<tr>
<td>b) Changed to cost effective alternative meter and strips plus quantity/frequency reviewed as per guidelines</td>
</tr>
<tr>
<td>c) Quantity of BGTS reviewed and reduced appropriately</td>
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<tr>
<td>d) BGTS ceased appropriately</td>
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