



From the desk of the chairman, Ketan Dhatariya

2024 has proved to be a fantastic year for ABCD members, with new programmes, events and activities. The executive continues to meet on a weekly basis to actively discuss and plan any aspects of work that could, would and should impact on ABCD members. We have our fingers in lots of pies and do our best to advocate on your behalf at every opportunity!

This year, the ABCD Executive has also focused on strengthening our governance and reporting responsibilities and our work with contractors.

Externally, we have been working to strengthen and enhance our relationships with partner organisations such as DUK and YDEF as well as our representation on national bodies.

In collaboration with our parent charity, Diabetes Care Trust, we have once again offered our members the opportunity to apply for research grants up to the value of £50,000. Unfortunately, despite much promotion, the applications we received were not deemed to be fundable. We are having a discussion on whether the funds should be offered for another grant or whether we use them to fund a higher degree for someone. We'll let you know when we have made a decision, so please look out for developments in the newsletter.

Having said that, we are delighted to be administering our "Dragons Den" style research grant programme for a second year. This programme provides researchers with the opportunity to present their proposals to a panel of experts, with a chance to win. This year we received six applications. The interviews took place on 29th November and we hope to announce the outcome very soon. Further information can be found here:

<https://abcd.care/dragons-den>

To date, in 2024 we have successfully hosted a number of national, regional and training events including:

- ABCD Diabetes Update
- ABCD CESR Application Support and Development Workshop
- ABCD Midlands Regional meeting
- ABCD DTN- UK Educators days in Manchester and London
- ABCD DTN-UK Annual Conference in Bristol
- ABCD Consultant Programme (CDP) in Birmingham

Our annual conference for DTN and ABCD, held on 4th and 5th September in Bristol, were a great success, with the highest attendance to a ABCD meeting in many years. We look forward to launching the 2025 conference in the new year. It will be in Newcastle in the autumn, and details will be in the newsletter in due course.

Confirmed events on the 2025 calendar so far include:

- **ABCD Diabetes Update**, 29th – 31st January 2025, Holywell Park, Loughborough. Places are running out very fast!
- **7th Joint ABCD UKKA meeting**, 12th February 2025, Holiday Inn, Birmingham Airport. There are still spaces, so go to the website to book your place.

In addition to our in-person events we are also hosting a quarterly webinar programme, which was launched in February 2024. To date, topics have included: Diabetes and Ramadan, Re:Mission study – learning from staff and service user insights from the NHS Low Calorie Diet pilot and Screening for and managing early type 1 diabetes. The final webinar of 2024, taking place on 11th December, will be Supporting people living with diabetes to achieve better outcomes: Impact of the ABCD audit

programme – update December 2024

If you missed these webinars, members can still view them online at <https://abcd.care/abcd-webinars>

We have also launched our new regular podcast series (ABCD Inspire Podcast) featuring regular podcasts, chaired by Dr Petra Hanson and featuring experts in the field discussing topics that matter to them and our members. Podcasts are being released monthly and we have released five so far, including:

- **Dr Emma Wilmot** – In this podcast Emma shares how her own personal circumstances and experiences inspired her journey into the field of diabetes, how that journey has progressed throughout her career and parenthood, the challenges that she has had to overcome trying to create a balanced lifestyle, and what exciting research projects she is currently focused on
- **Professor Parth Narendran** – In this podcast Parth shares his updates on autoimmunity in diabetes, his current research projects and how research has given him new opportunities
- **Dr Hermione Price** – In this podcast Hermione shares her interests in diabetes and research and her experiences of how to get research funded, getting the right supervisor and what to prioritise
- **Professor Mark Evans** – During their conversation Petra asks Mark what his journey into diabetes and research looked like, Mark shares his fascinating current research into insulin-induced hypoglycaemia, and describes how a fork in his road led to great experiences and consequent success
- **Dr Prashanth Vas** – Discover what first sparked Prash's interest in

research and why he believes it adds significant value to his clinical career. He also offers valuable advice for junior clinicians on how to make the most of the guidance from those they admire and look up to.

Now that the *British Journal of Diabetes* has been accepted for membership by the Committee of Publishing Ethics (COPE), Editor Marie-France Kong and Deputy Editor Chris Walton are working hard on securing articles for our application to PubMed. We are also inviting expressions of interest for the role of *BJD* Editor when Marie-France steps down – contact us for more information at info@abcd.care. We have exciting plans for the journal next year!

Our education programme continues, through our hosted organisations including the Joint British Diabetes Societies for Inpatient Care Group, the Obesity Management Collaborative and the Diabetes Technology Network. We have excellent educational content in multimedia format.

As I look back on the year, my thoughts also turn to our plans for 2025. They include continuing with

the educational programme, extending activities and collaborations internationally, working with YDEF, continued working with DUK and PCDS on workforce strategy and a structured review of our lifelong learning programme for members.

With more than 800 members, ABCD has a strong, vibrant and active membership and a powerful voice representing diabetes specialists and the patients for whom we care. There is always room for growth, however, and it is important that we are welcoming and inclusive in our membership. I continue to urge you all to act as ambassadors for the organisation and to welcome and encourage those who have yet to join to consider signing up. We are working with international partner organisations from around the world who have expressed an interest in associating and affiliating with us. If you have links with national organisations in different parts of the world who you think might like to talk to us about how ABCD can help them (or equally how they can help us!), then get in touch.

I would like to take this opportunity to

extend my sympathies to the family of Melissa Cull, who sadly passed away unexpectedly earlier this year. Melissa had worked with Bob Ryder for many years supporting the data entry for ABCD audits.

Finally, as always, I would like to take this opportunity to thank all our corporate sponsors of both ABCD and DTN, without whom none of these programmes and supporting activities would be possible. Sponsors include: AstraZeneca, Boehringer Ingelheim, Eli Lilly, Sanofi, A Menarini Farmaceutica Internazionale SRL, Abbott Laboratories Ltd, Dexcom, Ypsomed Ltd, Insulet International Ltd, A. Menarini Diagnostics, Advanced Therapeutics (UK) Ltd, Air Liquide Healthcare Ltd, Medtronic and Roche Diabetes Care.

As ever, if you think of things that you feel ABCD should be doing, then please let us know. We are your organisation, and we represent and advocate for you.

I look forward to seeing you all at our 2025 conference.

Professor Ketan Dhatariya
ABCD Chair, Norwich.

From the desk of the News Editor, Umesh Dashora

News from the Joint British Diabetes Societies for Inpatient Care (JBDS-IP) group (Omar Mustafa)

- The inpatient diabetes conference has returned after years of interruption due to the Covid pandemic. We had a successful meeting at the Royal Society of Medicine in June, attended by more than 100 delegates. The theme for this year focused on learnings from projects that did not go to plan as well as those that saw successful implementation. Plans are underway for the 2025 conference. Stay tuned!
- News articles from the Joint British Diabetes Societies for Inpatient Care: technology, hyperglycaemic emergencies (global consensus),

survey on enteral feeding practices in the UK.

- What we are working on: following a call to experts we are well underway working on a major update for the 2017 guideline on management of diabetes in adults and children with psychiatric disorders in inpatient settings. We are also in the advanced stages of a writing a new guideline for the management of diabetes in people undergoing bariatric/metabolic surgery.
- Welcome to Robert Darcy (consultant endocrinologist, Belfast) and Paula Johnston (new chair of DISN group; congratulations!). We bid farewell to Andrea Lake (DISN, Cambridge), who has been an amazing asset to the group during her tenure.
- The Diabetes Care Accreditation Programme (DCAP) list of centres

who joined the scheme continues to grow. It is a major step towards raising standards and reduce variability in inpatient diabetes care. Join the growing movement to improve inpatient diabetes care standards.

Rowan Hillson Award 2024 (Umesh Dashora)

The Rowan Hillson Award this year was won by Vishakha Bansiya and team from Cambridge University Hospital NHS Foundation Trust for their entry – ‘Pilot real-world implementation of fully closed-loop insulin pump for inpatient glycaemic management in patients with non-type 1 diabetes’. Helen Partridge and team from the University Hospital Dorset won the runner-up award for their project – ‘In-patient diabetes management and support of people with type 1 diabetes and



disordered eating, T1DE in an eating disorders unit'. These projects were judged on any or all aspects of empowering people with diabetes, demonstrating value for money, encouraging collaboration, scalability and sustainability. The winning teams were awarded their certificates and prize money (£500 for the winner and £300 for the runner-up) at the ABCD/DTN conference in Bristol (4th-5th September, 2024). ABCD supported free conference registration, complimentary places at the conference dinner, accommodation for one night and travel expenses for two team members from the winning and runner-up teams. The winning entries will also get a chance to publish their work on our website and in our journal. The project was led by Professor Umesh Dashora. The call for submissions for the 2025 award will be out soon.

Body weight and diabetes (Roy Taylor)

The NHSE reports on the 1-year data from the T2D Path to remission programme, which is now a nationally available programme.

Valabhji J, Gorton T, Barron E, *et al.* Early findings from the NHS type 2 diabetes path to remission programme: a prospective evaluation of real-world implementation. *Lancet Diabetes & Endocrinol* 2024;**12**(9):653-63.

Further research on 'The utility of using sequential LFT to monitor change in liver fat during weight loss' is soon to be published.

The DiGEST study in *Nature Medicine*

showed that weight loss achieved after diagnosis of GDM produces dramatically improved pregnancy outcomes (soon to be published).

Professor Roy Taylor delivered the Claude Bernard Lecture at the EASD conference in September, and the lecture is now available as a video online to members of EASD.

From the desk of Bob Ryder

The ABCD audit programme was prominent at the recent EASD in Madrid, with three presentations.

In a short oral presentation, Emma Wilmot presented data showing that in the ABCD NHS England pilot audit of hybrid closed-loop therapy (HCL) which was launched in 2021, irrespective of gender, ethnicity, age or socioeconomic status HCL is associated with similar reduction in HbA_{1c} at six months.

In a short oral presentation, ABCD research fellow, Alex Liarakos presented an analysis from the ABCD NHS England pilot audit of hybrid closed-loop therapy. The analysis demonstrated that HCL therapy is associated with long-term improvements in HbA_{1c}, Time In Range, hypoglycaemia and diabetes-related distress in adults with type 1 diabetes in the real world.

In a short oral presentation, Bob Ryder presented an analysis from the ABCD worldwide EndoBarrier registry which now has data on 1,101 EndoBarrier-treated patients. The analysis suggested that the considerable benefits of EndoBarrier on weight and HbA_{1c} are

achieved in nine months and that a reduction in the recommended implantation period from 12 to nine months would reduce serious adverse events (SAE). In particular, more than 60% of liver abscess SAEs would be avoided if the implantation period was reduced to nine months.

At the recent 84th Scientific Sessions of the American Diabetes Association (ADA) in Orlando, Florida, there were four presentations from the ABCD audit programme.

Harshal Deshmukh's abstract Time below range (TBR) and its link to impaired awareness of hypoglycaemia (IAH) and severe hypoglycaemia (SH)—evidence from the Association of British Clinical Diabetologists (ABCD) study received one of the top scores and he was awarded the ADA's Young Investigator Award. His presentation can be viewed on the ABCD YouTube channel.

Professor Hugh Jones presented an ePoster and Bob Ryder presented a poster of data from the ABCD testosterone in men with type 2 diabetes audit, showing that replacing testosterone in those with deficiency led to progressive reduction in HbA_{1c} over three years, alongside significant improvement in quality of life and symptoms of testosterone deficiency.

Tom Crabtree presented an ePoster and Ketan Dhatariya presented a poster from the ABCD semaglutide audit under the title "The impact of age on response to injectable semaglutide—insights from the Association of British Clinical Diabetologists' audit programme". The

analysis concluded that semaglutide is associated with HbA_{1c} reductions across all ages. Weight reductions are also similar despite differences in baseline weight; this may be variably desirable in older individuals where weight maintenance may be preferred to prevent frailty.

Bob Ryder presented an ePoster and a poster from the ABCD EndoBarrier Worldwide Registry. His analysis was of data from 1,101 patients from 36 centres in 11 countries. All had been treated with the Duodenal-jejunal Bypass Liner (DJBL) also known as EndoBarrier® and RESET®. The analysis suggested that the considerable benefits of DJBL on weight, glycaemic control and cardiovascular risk factors outweigh the risks.

From the desk of Rebecca Reeve

Human cell atlas project transforms understanding of human body

An ambitious plan to map all 37 trillion cells in the human body is transforming understanding of how our bodies work, scientists report. The journal *Nature* has now published a series of 40 scientific discoveries as researchers work towards creating the first draft of the whole human cell atlas.

“This is a major milestone that marks a great leap in understanding of the human body,” said Sarah Teichmann, from the University of Cambridge and one of the founders of the Human Cell Atlas.

Remove barriers on NHS data access to save patient lives – review

The Sudlow Review is a call to action for policymakers and healthcare leaders. It

emphasises that health data should be seen as critical national infrastructure requiring careful leadership and vital investment.

The review includes five recommendations that highlight the need to remove barriers, streamline processes, and enable safe and secure data use across the UK.

The Sudlow Review’s five recommendations:

1. Major national public bodies with responsibility for or interest in health data should agree a coordinated joint strategy to recognise England’s health data for what they are: a critical national infrastructure.
2. Key government health, care and research bodies should establish a national health data service in England with accountable senior leadership.
3. The Department of Health and Social Care should oversee and commission ongoing, coordinated engagement with patients, public, health professionals, policymakers and politicians.
4. The health and social care departments in the four UK nations should set a UK-wide approach to streamline data access processes and foster proportionate, trustworthy data governance.
5. National health data organisations and statistical authorities in the four UK nations should develop a UK-wide system for standards and accreditation of secure data environments (SDEs) holding data from the health and care system.

NHS England to screen 100,000 babies for more than 200 genetic conditions

The NHS in England is to screen 100,000 newborn babies for more than 200

genetic conditions in a world-first scheme aimed at bolstering early diagnosis and treatment. Blood samples from more than 500 newborns have already been collected at 13 NHS hospitals, with plans to offer the test to 100,000 babies across 40 hospitals in England.

Outstanding NHS teams from Manchester, Birmingham, Essex, Wales and Leicester were among many recognised at the prestigious 2024 Quality in Care Diabetes Awards

The Quality in Care (QiC) Diabetes team and Sanofi were delighted to hold the incredible live annual awards ceremony at Sanofi’s offices in Reading on Thursday 31st October. Take a look at this year’s results and share them with your colleagues.

The 2024 QiC Diabetes Awards saw worthy winners for Outstanding Educator in Diabetes – James Ridgeway and Diabetes Professional of the Year – Dawn Ackroyd. Daniel Newman took home the honourable People’s Award.

For the second year running a winner was announced for the Sanofi Green Award, an award for projects demonstrating a contribution to reducing carbon emissions in diabetes management. This year’s winner was an entry from Vincent Simpson (Royal Devon Hospital) and Deepthi Lavu (University of Exeter) for their project around a Green Diabetes Formulary.

<https://www.royaldevon.nhs.uk/news/exeter-doctor-campaigns-to-cut-plastic-waste-through-promoting-reusable-insulin-pens/>

Look out for how to enter your projects for the 2025 awards, which will be in their 15th year.

Interesting recent research

Umesh Dashora

A rapid-fire collection (extract) of interesting recent developments in diabetes

Authors, Journal	Type of Study	Main results
Griffin <i>et al</i> , <i>Diabetes Care</i>	Cohort study	<p>Use of SGLT-2 inhibitors versus DPP-4i as an add-on therapy and the risk of PAD-related surgical events</p> <p>In this comparison of nearly 75,000 use episodes of both of these medications, SGLT-2 inhibitors were associated with a slightly increased risk of peripheral artery disease-related surgical events with a HR of 1.18.</p> <p><i>Katherine E. Griffin, Kathryn Snyder, Amir H Javid, et al. Use of SGLT2i versus DPP-4i as an add-on therapy and the risk of PAD-related surgical events (amputation, stent placement, or vascular surgery): a cohort study in veterans with diabetes. Diabetes Care 2024; dc241546. https://doi.org/10.2337/dc24-1546</i></p>
Simmons <i>et al</i> , <i>Diabetes Care</i>	RCT	<p>Regression from early GDM (before 20 weeks) to normal glucose tolerance at 26 weeks is associated with normal pregnancy outcomes</p> <p>This study reports pregnancy outcomes among women with normal glucose tolerance test at 20 weeks' gestation and 26 weeks' gestation (no GDM), those with early gestational diabetes mellitus who were randomised to observation with a subsequent normal OGTT (GDM-regression) and those with GDM on both occasions (GDM-maintained). GDM-regression group risk factors and OGTT results fell between the no-GDM and GDM-maintained groups, with adjusted incidences of pregnancy complications similar between GDM-regression and no-GDM groups. Identifying the early GDM group likely to regress would allow treatment to be avoided.</p> <p><i>David Simmons, Jincy Immanuel, William M Hague, TOBOGM Research Group; regression from early GDM to normal glucose tolerance and adverse pregnancy outcomes in the treatment of booking gestational diabetes mellitus study. Diabetes Care 2024; 47 (12): 2079-84. https://doi.org/10.2337/dc23-2215</i></p>
Gao <i>et al</i> , <i>Diabetes Care</i>	Systematic review and meta-analysis	<p>Safety and efficacy of SGLT-2 inhibitors in hospitalized patients</p> <p>This review of 23 RCTs and 19,846 participants suggest a numerically higher rate of diabetic ketoacidosis in hospitalised people with diabetes on SGLT-2 inhibitors. However, acute kidney injury and heart failure outcomes improved.</p> <p><i>Frank M. Gao, Aleena S. Ali, Rinaldo Bellomo, et al. A systematic review and meta-analysis on the safety and efficacy of sodium-glucose cotransporter 2 inhibitor use in hospitalized patients. Diabetes Care 2024; 47 (12): 2275-90. https://doi.org/10.2337/dc24-0946</i></p>
Ma <i>et al</i> , <i>Diabetes, Obesity and Metabolism</i>	Review article	<p>Growth factor receptor-bound protein 2 (GRB2) in diabetes</p> <p>In this review the authors have suggested a crucial role of GRB2 in insulin resistance, inflammation, growth, metabolism, angiogenesis, apoptosis and differentiation. Abnormalities of GRB2-mediated pathways may contribute to the progression of diabetic neuropathy, cognitive dysfunction, nephropathy, retinopathy and related disorders.</p> <p><i>Ma J, Dong Y, Liu J, Gao S, Quan J. The role of GRB2 in diabetes, diabetes complications and related disorders. Diabetes, Obesity and Metabolism 2025;B27: 23-34. https://doi.org/10.1111.dom.16015</i></p>
Bell <i>et al</i> , <i>Diabetes, Obesity and Metabolism</i>	Review article	<p>Diabetic Charcot neuroarthropathy (DCN) is a risk to limb as well as life.</p> <p>In this review the authors summarise the current understanding of DCN. It occurs in less than 1% of people with diabetes but the incidence can be as high as 30% in people with symmetrical peripheral polyneuropathy. Factors that precipitate DCN include trauma, ischaemia due to arterio-venous shunting, increased osteoclastic activity and inflammation. The joints that are most typically involved are tarsometatarsal followed by the naviculocuneiform, subtarsal, talonavicular, metatarsal and tarsophalangeal in that order. The risk of amputation is high and increases in the presence of a foot ulcer. DCN is associated with manifestations of autonomic neuropathy, including cardiac denervation, so the risk of a cardiac event and heart failure are high. Mortality is also increased with DCN, especially in the presence of a foot ulcer. To avoid the recurrence of DCN, and especially to lower the risk of recurrence of a foot ulcer, repeated reconstructive surgery may be needed.</p> <p><i>Bell DS, Jerkins T. Diabetic Charcot neuroarthropathy: a threat to both limb and life. Diabetes, Obesity and Metabolism 2025;27: 35-39. https://doi.org/10.1111/dom.15994</i></p>
Li <i>et al</i> , <i>Diabetes, Obesity and Metabolism</i>	Cohort study	<p>Association of hypertension and long-term blood pressure changes with new-onset diabetes (NOD) in the elderly.</p> <p>The authors of this 10-year study found age, gender, baseline hypertension and systolic blood pressure to be independent predictors of NOD. Hypertension combined with overweight/obesity significantly increased the risk of NOD. The authors suggest that maintaining SBP consistently below 130 mmHg may be an effective strategy to reduce the incidence of NOD.</p> <p><i>Li S, Yang B, Shang S, Jiang W. Association of hypertension and long-term blood pressure changes with new-onset diabetes in the elderly: a 10-year cohort study. Diabetes, Obesity and Metabolism 2024.</i></p>

Authors, Journal	Type of Study	Main results
Zheng <i>et al</i> , <i>Diabetes, Obesity and Metabolism</i>	Cost-effectiveness modelling study	<p>Cost effectiveness of fineronone added to standard of care in people with type 2 diabetes related kidney disease in the United States</p> <p>In this model the authors showed that for people with type 2 diabetes-related chronic kidney disease, adding fineronone to standard of care may be a cost-effective option in the United States. Price reduction could potentially benefit more patients.</p> <p>Zheng C, Wu J, Li N, Wei X, <i>et al</i>. Cost-effectiveness of fineronone added to standard of care for patients with type 2 diabetes-related chronic kidney disease in the United States. <i>Diabetes, Obesity and Metabolism</i> 2025; 27: 165-73. https://doi.org/10.1111/dom.15997</p>
Dai <i>et al</i> , <i>Diabetes, Obesity and Metabolism</i>	Cost-utility study	<p>Cost-utility analysis of once-weekly insulin icodec and once-daily insulin glargine in people with type 2 diabetes receiving basal bolus therapy in China</p> <p>In this study the authors have explored the price range of insulin icodec where it would become cost-effective compared to insulin glargine. In the long-term simulation, the authors found that insulin icodec and insulin glargine performed similarly in terms of quality-adjusted life years (QALYs). In-depth analysis revealed that insulin icodec may have higher cost-effectiveness potential.</p> <p>Dai N, Su X, Wang Y. Cost-utility analysis of once-weekly insulin icodec and once-daily insulin glargine in patients with type 2 diabetes receiving basal-bolus insulin therapy in China. <i>Diabetes, Obesity and Metabolism</i> 2025; 27: 377-86. https://doi.org/10.1111/dom.16031</p>
Solis-Herrera <i>et al</i> , <i>Diabetes</i>	Experimental study	<p>Hyperketonaemia improves myocardial function</p> <p>In this study ketones were infused in people with type 2 diabetes and heart failure with EF < 50. Cardiac MRI and PET scan showed improvement in cardiac output, LVEF and stroke volume compared to controls. Myocardial glucose uptake and myocardial blood flow was not altered by ketones. The experiment suggested that the ketones provide an alternative fuel to the myocardium.</p> <p>Carolina Solis-Herrera, Yuejuan Qin, Henri Honka, <i>et al</i>. Effect of hyperketonemia on myocardial function in patients with heart failure and type 2 diabetes. <i>Diabetes</i> 2024; db240406. https://doi.org/10.2337/db24-0406</p>
Golubic <i>et al</i> , <i>Diabetic Medicine</i>	Systematic review and meta-analysis	<p>Glucocorticoid treatment and new-onset hyperglycaemia and diabetes in people living with chronic obstructive pulmonary disease</p> <p>The authors included 18 studies comprising 3,642 people of whom 3,125 received systemic glucocorticoids and 1,189 developed hyperglycaemia, giving a pooled prevalence of glucocorticoid induced hyperglycaemia of 38.6% and the pooled relative risk of 2.39.</p> <p>Golubic R, Mumbole H, Ismail MH, <i>et al</i>. Glucocorticoid treatment and new-onset hyperglycaemia and diabetes in people living with chronic obstructive pulmonary disease: a systematic review and meta-analysis. <i>Diabet Med</i> 2024:e15475. https://doi.org/10.1111/dme.15475. Epub ahead of print. PMID: 39642210.</p>
Song <i>et al</i> , <i>Diabetic Medicine</i>	Retrospective observational study	<p>Prognostic markers in DKA and severe hyperglycaemia</p> <p>The authors included 429 episodes of DKA in 293 people and 643 episodes of severe hyperglycaemia (SH) in 515 people over nearly 3.5 years. 32.3% of DKA events in T2DM were associated with SGLT-2 inhibitors. In both SH and DKA, patients with T2DM were older and had more co-morbidities than those with T1DM, particularly cardiorenal disease, heart failure, cognitive impairment and cancer. Compared with type 1DM, mortality was higher in T2DM after severe hyperglycaemia (48% vs. 20%) and after DKA (31% vs 13%), with shorter median time to fatal outcome. Most deaths, irrespective of diabetes type, were non-cardiovascular.</p> <p>Song SH, Frier BM. Severe hypoglycaemia and diabetic ketoacidosis in adults presenting to a hospital emergency department: adverse prognostic markers for survival in type 2 diabetes and the role of SGLT2 inhibitors. <i>Diabetic Medicine</i> 2024:e15466.</p>
Gunabalasingham <i>et al</i> , <i>Diabetic Medicine</i>	Systematic review	<p>Interventions in women with type 2 diabetes in pre-pregnancy, pregnancy and postpartum periods to optimise care</p> <p>This study included 11 trials including 1,356 women with T2DM and pregnancy. Ten interventions were identified in pregnancy and one was postpartum. The largest T2DM pregnancy study to date demonstrated evidence of benefit for adding metformin to a standard insulin regime compared to insulin alone. Overall, there was a lack of well-designed interventions in this group before during or after pregnancy.</p> <p>Gunabalasingam S, Kyrka A, Hopkins L, <i>et al</i>. Interventions in women with type 2 diabetes mellitus in the pre-pregnancy, pregnancy and postpartum periods to optimise care and health outcomes: a systematic review. <i>Diabetic Medicine</i> 2024:e15474.</p>
Sinclair <i>et al</i> , <i>Diabetic Medicine</i>	Position statement	<p>A practical guide to managing type 1 diabetes in care homes</p> <p>In this document, the authors from the National Advisory Panel on Care Home Diabetes (NAPCHD) outline minimum standards of diabetes care, insulin regimens, avoiding hospitalisation and discharge planning. A scheme for a community-based model of care for T1DM has been included. Eight key messages are included. There is an appendix which includes key assessments such as nutritional assessment, detection of frailty, sick day rules and foot risk stratification.</p> <p>Sinclair AJ, Bellary S, Middleton A, <i>et al</i>. Type 1 diabetes in care homes: a practical guide on management. <i>Diabet Med</i> 2024:e15457. https://doi.org/10.1111/dme.15457. Epub ahead of print. PMID: 39500566.</p>

YDEF NEWS

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Travel scholarships to attend the European Association for the Study of Diabetes (EASD) September 2024 meeting – accounts from recipients of the award

The Young Diabetologists and Endocrinologists' Forum (YDEF) are delighted to award national scholarships to support Diabetes and Endocrinology specialist trainee doctors to attend international meetings. These conferences offer excellent networking opportunities, dissemination of best practice and insights into cutting-edge research.

The YDEF are grateful to Lilly for sponsoring the travel award to the 60th European Association for the Study of Diabetes (EASD) Conference held in Madrid, Spain from 9th-13th September 2024. The travel scholarships are awarded following a competitive written application process, with priority given to trainees who have secured a poster or oral presentation at the meeting. In this article, we are pleased to share three accounts from doctors who benefitted from the 2024 YDEF-Lilly EASD scholarship award. Congratulations to the five recipients of the award and we look forward to receiving future applications for the 2025 travel scholarship!

Please encourage doctors in training to apply. Full details and opening/closing dates are provided in the YDEF monthly newsletter (join YDEF and sign-up to our newsletter here: <https://www.youngdiabetologists.org.uk/>).



Dr Nick Thomas, Diabetes and Endocrinology Specialist Registrar, Department of Clinical and Biological Sciences, University of Exeter



"It was a fantastic experience attending EASD 2024 in Madrid. I thoroughly enjoyed connecting with fellow early-career researchers, both through the YDEF programme and the EASD Early Career Academy. Presenting my work sparked insightful questions and opened up valuable networking opportunities, which I hope will lead to new collaborations. The programme was diverse and highlighted the exciting advancements happening, particularly in the type 1 diabetes space. I was impressed by the tangible progress in technology and stem cell therapies, as well as the growing momentum in pre-symptomatic type 1 diabetes research. As an early career clinician, it was uplifting to see how these scientific developments are poised to improve the lives of both current and future patients."

Dr David Williams, ST6 Diabetes and Endocrinology registrar, Wales Deanery



Europe and beyond.

"I attended sessions discussing the genetics of type 2 diabetes, use of incretin-based therapies, use of diabetes technologies in people with diabetes, role of exercise in people with diabetes, and several short oral presentation sessions on other topics. However, my favourite session at the meeting was the thorough breakdown of the new MASLD guidelines published by the EASD in collaboration with EASL and EASO. This has helped me instrumentally to develop and focus my own research questions within my current PhD and reinforced my own career goals to develop a clinical-academic role to support integration of research into clinical practice."

"This has been an invaluable experience in my own training and development, providing a lot of food for thought with my current research work and a chance to reflect and develop my current clinical practice. I am already hoping to be able to attend EASD next year in beautiful Vienna!"

Dr Nithya Kadiyala, Clinical Research Fellow, Institute of Metabolic Science, University of Cambridge

"Attending the EASD Conference 2024 was an enriching experience, with a full week of presentations and networking opportunities. The comprehensive programme covered key topics in diabetes technology, directly relevant to my current research on automated insulin delivery systems. I gained valuable insights from talks on the psychosocial impact of technology, as well as its use in pregnancy, older adults, and inpatients with diabetes. This helped contextualise the trials I am currently involved in and understand gaps that need to be addressed. Additionally, networking with other early career researchers from both the UK and abroad in an informal, friendly setting provided a unique opportunity to learn about their research interests, discuss shared challenges, and explore opportunities to develop as a clinical researcher."



Amy Coulden E-mail: amy.coulden@nhs.net

YDEF is dedicated to all diabetes and endocrine trainees and is open for new members to register on our website. Take advantage of our regular newsletters and up-to-date advertising of a wide variety of courses and meetings to complement your training. As always, we are continuously looking to develop and propagate our speciality so do not hesitate to contact us if you have any suggestions or questions!



<https://abcd.care/dtn/about-dtn-uk>

The Diabetes Technology Network UK, is an organisation designed to support UK health care professionals who are involved in the delivery of technologies designed to improve the lives of people living with diabetes.

2024 has been another fantastic year for diabetes technology. We in the Diabetes Technology Network (DTN) committee are very grateful for all your hard work to improve access for people with diabetes. Here are some of the things we have been doing, and please get in touch if you have any suggestions for how we can support you in the future.

- We have continued to work closely with the team from NHS England to support the rollout of hybrid closed-loop (HCL) systems in line with NICE technology appraisal (TA) 943
- We will be launching webinars early in 2025 which will offer the opportunity to update you on progress and to identify and answer your key questions
- Many thanks to all those who participated in our recent survey regarding training in HCL systems. We look forward to sharing the results with you soon
- The DAFNE “Closed loop essentials” online course has shown great uptake so far. Please continue to make use of this excellent free resource. Teams in non-DAFNE centres who would like to offer this course can contact the DAFNE central team via dafne@nhct.nhs.uk
- Keep an eye on our website for constantly updated resources. New videos and other resources will be available in the New Year
- We are working to update our best practice guide for using diabetes technology in pregnancy, and are also developing new guidance on using HCL systems in special populations
- HCL modules are now available on Glooko Academy for you to collect your CPD points and enhance your knowledge
- We have also published guidance, in partnership with the JBDS-IP group, regarding the use of technology in the inpatient setting. The guidance is available at <https://abcd.care/jbds-ip>

We look forward to continuing to work with you all in 2025

Some dates for your diaries (book your study leave now):

- **The ever popular DTN Educator Days**
 - London 14th March 2025
 - Manchester 24th March 2025
- **The DTN Annual Meeting**
To be held in Newcastle on the 6th November 2025



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