MINIMED 670G MANAGING FOOD

Medtronic

CONSIDERATIONS

Behaviours	A. Bolus 15 mins before eating	B. Check hypo treatment: avoid excessive carbohydrate intake
	C. Avoid fake carb entry to correct rising glucose levels	D. Work with Individual on dietary preferences

Key Steps for Managing Challenging Meals

1 >>	2 >>	3
Check Carb Counting Accuracy	**Optimise Insulin to Carb Ratio (ICR)**	**Add insulin for high fat and high Protein meals.**

CHALLENGING MEALS

EXAMPLE: Susie

Fat and Protein meal: It is common to see a fall in glucose immediately post bolus followed by a sustained rise in glucose approx. >2 hour later.

Example: Susie

- At 6am Susie bolused for breakfast- 15 grams of Carb.
- Her glucose dropped from 8.4 mmol/L to 6.7mmol/L.
- This was followed by a rise in glucose 1hour post bolus and continued to stay above 10mmol/L for several hours

Clinical guidelines now recommend dosing for fat and protein[1]

MEAL DOSING FOR CHALLENGING MEALS
Manual Mode Vs Auto Mode*

MEAL TYPE	MANUAL MODE	AUTO MODE
High Carb	Bolus Insulin 15mins before eating [2]	Give 80% of Insulin dose before meal and 20% at 1hr
High Protein, without Carb	Give equivalent of 15g of Carb immediately prior to eating. Increase dose based on individual response.[3]	
High Protein with Carb	Add 20-30% to Carb dose.[4] Give in a dual wave, 70:30 over 3hrs.	Add 20% to Carb dose. Give 70% of total dose before meal and 30% at 1hr post meal
High Fat, High Protein with Carb	Add 20-40% to Carb dose[5] Give in a dual wave, 60:40 over 3hrs.	Add 20-30% to Carb dose. Give 60% of total dose before and 40% at 1hr

MEAL DOSING FOR CHALLENGING MEALS
Simple adjustments for Auto Mode*

Carbohydrate in the meal (g)	Add 20% to Carb dose			
	Fat and Protein supplement (g)	Total grams to bolus	70:30 Split Bolus (g)	60:40 Split Bolus (g)
20	5	25	20 : 5	15 : 10
30	5	35	25 : 10	20 : 15
40	10	50	35 : 15	30 : 20
50	10	60	40 : 20	35 : 25
60	15	75	55 : 20	45 : 30

References: 1. ISPAD Clinical Practice Consensus Guidelines 2018: Nutritional management in children and adolescents with diabetes: Smart C et al. DOI: 10.1111/pedi.12738. ADA Pharmacologic approaches to glycemic treatment: Standards of Medical Care in Diabetes 2020. Diabetes Care 2020;43(Suppl.1):S98–S110. 2. Smart et al. Diabetes Care 2020,43 :13-15. 3.Paterson et al, Diabetes Med 2015 doi:10.11 11/dme.13011. 4.Paterson et al, Diabetes Med 2017June 34 (6): 851-854.
5. Bell et al. Diabetes care 2020 43 :59-66. *Medtronic data on file .

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