

MiniMed™ 780G system - follow-up patients in 3 steps by using CareLink™ data.

1 Review therapy goals

Assessment & progress report



Review therapy goals:

Time in Ranges ¹	mmol/L	Goal
Time Above	13.9	<5%
Time Above	10.0	<25%
Time In Range (TIR)	3.9 - 10	>70%
Time Below	3.9	<4%
Time Below	3.0	<1%

HbA1c Goal^{2,3}:

Adults: <7%
(<53 mmol/mol)



Paeds: <7%
(<53 mmol/mol)

Coefficient of variation (CV)⁴ Goal: <36%

SmartGuard™ use



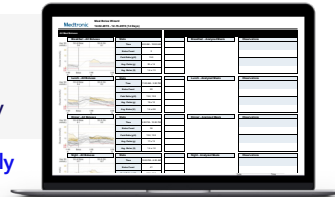
Sensor usage⁵



- Time in Ranges are international consensus goals¹
- Personalised patient goals may be different
- Action may not be required if personalised goals are met - consider as well the level of diabetes control before starting with the MiniMed™ 780G system.

2 If goals are not met review therapy

Meal bolus wizard & weekly /daily review report



Review auto basal target & AIT

- Is Auto basal target set to 5.5 mmol/L? AIT set to 2-3 h?
- If no, are higher settings warranted?

Time above range is high

- Bolus timing: pre-meal glucose rise -> consider earlier timing of bolus
- Boluses omitted?
- Insulin to carb ratio: 2-hour post-prandial glucose is >10.0 mmol/L and bolus timing is appropriate -> consider strengthening ICR (i.e. change ICR from 10 to 9 g/U)

Time below range is high

- Bolus timing?
- Overestimation of carbs (avg carbs/meals are listed)?
- ICR: Smaller meal bolus may be needed (i.e. change ICR from 8 to 9 g/U)
- Persistent lows without a bolus: consider higher target
- Persistent lows after Auto correction boluses: consider lengthen AIT (i.e. change from 2.0 to 2.5 hours)
- Exercise: temp target used?
- Low during sleep? Smaller meal/snack bolus may be needed prior to bed or program higher target or even temp target



Consistent highs or lows post-meal

- Adjust carb ratio down or up by 10-20% respectively

Inconsistent highs or lows post-meal

- Discuss and assess carb counting skills and consider bolus timing

SmartGuard™ use



Educate on sensor wear

Sensor usage⁵



Educate on sensor use and care; explore reasons for underuse

3 Update manual mode settings

Device settings /Assessment & progress reports



Best practice

- Evaluate Manual mode settings 1-2 weeks after starting SmartGuard™ feature & at every clinic appointment
- Adjust settings to mirror SmartGuard™ settings

Recommendations

- **Adjust BG Target:** 5.5 - 6.7 mmol/L to match how the SmartGuard™ algorithm is working
- **Adjust ISF:** mmol/L: 100 Rule ÷ Current Total Daily Dose (TDD)
- **Basal Rates:** Ensure Manual mode 24-hr. basal total < 50% of total daily dose (TDD) - check Statistics section Assessment & Progress Report and compare with Manual mode basal rate on Device Settings Report
- Suspend before low 'ON'



- After each intervention, allow system time to adapt before making further adjustments. Generally 2 weeks unless issue with hypoglycaemia exists
- Consider changing only one or two settings or behaviours at the same time
- **In general:** The system needs time to adapt and it might need a few days, but maybe also several weeks.

Always follow the instructions for use.

For detailed information regarding the instructions for use, indications, contraindications, warnings, precautions, and potential adverse events, please consult the device manual. For further information, contact your local Medtronic representative.

References

1. Battelino T et al. Clinical Targets for Continuous Glucose Monitoring Data Interpretation: Recommendations from the International Consensus on Time in Range. *Diabetes Care* 2019; 42: 1593-1603
2. Battelino T et al. Routine use of continuous glucose monitoring in 10 501 people with diabetes mellitus. *Diabet Med* 2015. 2(12):1568-74.
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4. Danne, T, et al. International Consensus on Use of Continuous Glucose Monitoring. *Diabetes Care*. 2017;40:1631-1640.
5. Standards of Medical Care in Diabetes–2019. American Diabetes Association. *Diabetes Care* 2019 Jan; 42(Supplement 1): S61-S70. <https://doi.org/10.2337/dc19-S006>
6. Carlson, AL. et al. Poster at the 80th International Conference of the American Diabetes Association, June 12-16. 2020, Chicago/Virtual.
7. Medtronic data on file. Pivotal Trial (Age 14-75). N=157. 2020; 16 US sites.
8. Battelino T, et al. *Diabetes Care* 2019;42(8): 1593-1603.
9. ADA Guidelines <https://www.diabetes.org/a1c>.

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