Blood Glucose Monitoring (BGM)
Do I need to test?

Do I really need to carry out all those finger pricks if I don’t take tablets or only take metformin tablets?

Information for patients

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What is changing about blood glucose monitoring?

• Healthcare professionals have looked at reasons for using blood glucose testing strips for people who have type 2 diabetes. This follows recent advice by the National Institute of Clinical Excellence (NICE) and Scottish Intercollegiate Guidelines Network (SIGN). These are recognised professional bodies which provide clinical guidance to the NHS.

• For people with diabetes who do not use insulin, the evidence shows that self-monitoring with blood glucose testing strips may not lead to better control of blood glucose levels.

• So we are asking people with diabetes, their doctors and nurses, and other prescribers, to think carefully about using blood glucose testing strips.

• The next time your family doctor (GP) or practice nurse talks to you about diabetes, they will also discuss with you your use of blood glucose strips.
What is the best way of monitoring control of my diabetes?

- When you have a diabetes check-up, you will give a blood sample for the HbA1c test.

- The HbA1c shows how well your diabetes is being managed and gives a comparison against the previous two to three months.

- Your doctor will usually test your HbA1c once a year but it may be more often, depending on the result and your individual circumstances.

- HbA1c is the gold standard for measuring diabetes control and for many people it is all that is needed.

When should I test my own blood glucose level?

The majority of individuals with type 2 diabetes who do not take tablets or are only on metformin tablets do not need to self-test their blood glucose level. However:

- It is essential to test if you are ill or pregnant or planning to become pregnant.

- If your diabetes is not controlled (measured by your HbA1c blood test) or if your medication is changed then your GP may ask you to self-test.
• We may suggest self-testing as a short term measure. This will depend on your individual circumstances, which you can discuss with your doctor or nurse.

• If you are advised to self-test your doctor or nurse will be able to advise you on the best times to test your glucose level, and what action to take if it is too low or too high.

• Knowing what to do with the result of the test is more important than just collecting a lot of results.

Why was I previously advised to buy a blood glucose monitor?

Some people were advised to carry out self-monitoring of blood glucose in the past because it was assumed that it would lead to better control. Since NICE reviewed the evidence and issued guidelines, it is more widely recognised that blood testing does not always lead to better control of blood glucose levels in people with type 2 diabetes.
What are the benefits of this change?

• The most obvious benefit is that you do not need to do the finger-pricking as often - if at all.

• Studies have shown that patients who do not use insulin but do blood glucose testing, may have greater distress and worry, without any improvement in overall control.

What if I am worried about stopping?

We think that most people with type 2 diabetes who are not taking any tablets or who are only on metformin tablets do not need to test their blood. But when you are used to testing it can be difficult to stop. If your doctor or diabetic nurse tells you that it’s safe to stop, but you are unsure about this, it should be possible to reduce how many times you test. When you are reassured that it is safe, you can then stop.
You can improve your health and diabetes control if you:

• Are as active as possible and include activities or exercise in your daily routine
• Eat healthy foods and maintain a healthy lifestyle
• Maintain the right weight for your height
• Stop smoking
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Last reviewed: June 2012
Leaflet reference: MIS12-074-CC