Dear (INSERT NAME OF TD)

I am a constituent and regular voter in your area.

I/my family member have/has lived with [INSERT THE TYPE OF DIABETES] diabetes for [INSERT YOUR DIABETES DURATION] years. I often feel that… (*write here your personal story and the reason why you would like to highlight this particular issue to politicians)*.

As a member of the diabetes community, I am writing to you to ask for your support by asking the Minister for Health to:

1. Set up a Taskforce to develop a 10-year National Diabetes Strategy to improve access and delivery of diabetes care services, diminish the risks of avoidable serious complications, and improve the quality of life, health, and well-being of more than 300,000 people living with diabetes and their families in Ireland.

1. Secure additional funding of €5m to improve access to any form of a Continuous Glucose Monitoring System (CGM) for all people with Type 1 diabetes in Ireland.

In support of these two issues, I would be grateful if you would submit the following parliamentary questions to the Minister for Health on my behalf:

1. To ask the Minister for Health, if he will set up a Diabetes Taskforce of relevant stakeholders to develop a National Diabetes Strategy that will ensure the provision of optimum care to every person with diabetes and if he will make a statement on the matter.
2. To ask the Minister for Health if he will make funding available (€5 mln) in the upcoming budget to enable increased access to Continuous Glucose Monitoring for people with Type 1 diabetes.
3. To ask the Minister for Health if he has plans to make Freestyle Libre Intermittently Scanned Sensor Technology (a type of CGM) available to all people with Type 1 diabetes without age restriction, and if he will make a statement on the matter.

Further information on these issues is attached and can be found at <https://www.diabetes.ie/pre-budget-submission-2024/>

Thank you for your time in considering my request.

I look forward to hearing from you in due course.

Yours sincerely,

Your Name, Address, Email

ADDITIONAL INFORMATION ABOUT THE ASKS

**WE NEED A NATIONAL DIABETES STRATEGY**

Diabetes is a serious global public health issue that has been described as the most challenging health problem in the 21st century with high individual, social, and economic burden. The cost of diabetes care and complications is a major challenge for the government and the Health Service Executive (HSE). Due to poor resourcing, there are significant gaps in current services that need to be tackled in order to provide optimum diabetes care to everyone in need. With no data – diabetes registry nor clinical audits, we cannot even fully identify what the gaps and issues are. From what we know, despite the best efforts of current diabetes staff, the delivery of diabetes services in Ireland is at best piecemeal, uncoordinated, and unstructured.

Despite the positive work of the HSE National Diabetes Clinical Programmes and Sláintecare reform, the lack of available resources to implement current clinical guidelines means people living with diabetes are suffering from a postcode lottery when it comes to accessing diabetes services and treatments, as well as diabetes-related technology (CGM or insulin pumps). With the continuously increasing prevalence and incidence of both, Type 1 and Type 2 diabetes, in children and in adults, and with a very high prevalence of pre-diabetes, gestational diabetes, other types of diabetes, and obesity in Ireland, without strategic planning and long-term thinking, the prevalence of diabetes-related comorbidities and complications such as macrovascular disease, chronic kidney disease, retinopathy, and blindness, as well as foot amputations will hugely affect Government budgets due to unnecessary and avoidable hospitalisations and admissions.

All people with diabetes need and deserve access to high standards of care, expertise, treatment aligned with clinical recommendations, and access to medicines and technology to maintain good health and quality of life, as recommended by national and international clinical guidelines. With dedicated healthcare professionals, researchers, advocates, and decision-makers, with Sláintecare reform, Long-Term Illness Scheme, and other good things in Ireland, all we need is a better plan, coordination, governance, and a strategy that oversees all aspects of diabetes care in Ireland.]

**ACCESS TO CGM FOR ALL**

For those living with diabetes, in particular with Type 1 diabetes, frequent daily glucose monitoring is essential to maintain safety and well-being and reducing the risk of short- and long-term diabetes complications. It is recommended that people using insulin check their glucose levels a minimum of 4 times per day, but in reality, they need to check a lot more often – before any meal, if they feel unwell, before bed, at nighttime etc. This level of frequent testing using traditional finger-pricking devices can be painful, inconvenient, and difficult to achieve as people go about their daily lives, and it provides one-off information about current glucose levels only.

For the last couple of years, Continuous Glucose Monitoring (CGM) changed the way people manage diabetes – this disruptive technology helps people living with type 1 diabetes and all others using intensive insulin therapy move away from the hassle of multiple daily finger pricks (to check their blood sugar levels) and instead enables needle-free monitoring of blood sugar via a sensor inserted on the arm. It also provides contextual information – trends (shows whether the glucose levels are rising or falling or are stable) and some provide alarms when the glucose levels drop or rise. This information enables better decision-making about insulin dosing and many other activities. CGM is also used as part of an automated insulin delivery system – an artificial pancreas system.

Many international societies and guidelines recommend CGM use as an essential part of Type 1 diabetes management. Updated NICE (2022) guidelines used across the UK recommend that CGM/FSL (FreeStyle Libre intermittently scanned sensor, which is also a type of CGM) should be provided to all people with diabetes using insulin. In Ireland, NICE guidelines are used for adults with Type 1 diabetes, but the last edition was launched in 2018 and has not included this emerging technology by then. The same year, in line with the recommendations of the Health Technology Assessment Group (HTAG), the FSL device (a form of Flash Glucose monitoring that requires users to scan the sensor on their arm) was made available on an individualised basis to children and young adults with type one diabetes (age 4-21 years) through the Primary Care Reimbursement Scheme (PCRS). This has resulted in inequity of access and discrimination with devices provided based on age rather than clinical need.

Differences in routes of access to technologies approved for funding exist according to system type and components. For example, Dexcom CGM is available with no age restriction, and the most recent model (G7) is available on prescription only. A HIQA Rapid Health Technology Assessment of CGM in Adults with Type 1 diabetes has been requested by the Minister for Health Stephen Donnelly in the end of 2022 and has been recently completed (2023) - we are awaiting official recommendations now. In line with international best practice, the National Clinical Programme (NCP) for Diabetes is requesting **a broadening of the criteria for the provision of a form of CGM to all individuals living with Type 1 diabetes in Ireland**. Bearing in mind that many people already use CGM in Ireland, securing €5 million by the Government in the Budget 2024, will facilitate more equitable access and reduce disparities for those living with type 1 diabetes who have not availed of this technology yet, will help them improve their diabetes management, outcomes, and quality of life. Diabetes Ireland fully supports this request.