Dear Joe Bloggs,

Welcome to your Evidence Update email from KnowledgeShare. The resources listed below have been chosen based on the interests you have provided. I hope they are useful. Please contact me via email if you would like a copy of any of the journal articles. If you would like to change the interests we have listed, stop receiving the notifications, or request a search on a specific topic, please don’t hesitate to let me know.

Diabetes

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

A cluster randomised trial, cost-effectiveness analysis and psychosocial evaluation of insulin pump therapy compared with multiple injections during flexible intensive insulin therapy for type 1 diabetes: the REPOSE Trial.
[Background: Insulin is generally administered to people with type 1 diabetes mellitus (T1DM) using multiple daily injections (MDIs), but can also be delivered using infusion pumps. In the UK, pumps are recommended for patients with the greatest need and adult use is less than in comparable countries. Previous trials have been small, of short duration and have failed to control for training in insulin adjustment.]
Freely available online

Canagliflozin, dapagliflozin and empagliflozin monotherapy for treating type 2 diabetes: systematic review and economic evaluation.
[Background: ...Even modest weight loss can improve control of blood glucose. If drug treatment is necessary, the drug of first choice is metformin. However, some people cannot tolerate metformin, which causes diarrhoea in about 10%, and it cannot be used in people with renal impairment. This review appraises three of the newest class of drugs for monotherapy when metformin cannot be used, the sodium–glucose co-transporter 2 (SGLT2) inhibitors.]
Freely available online

Children and young people with diabetes: recognition and management.
[Diabetes mellitus (type 1) is an autoimmune condition leading to absolute insulin deficiency resulting in hyperglycaemia and its associated manifestations. It is the most common type of diabetes seen in children, characterised by the 4Ts (toilet, thinner, thirsty, tired). Nurses working in different clinical settings play a vital role in raising suspicions of diabetes leading to timely diagnosis and treatment and are best placed to provide essential support to children and their families.]
Available with an NHS OpenAthens password for eligible users

Dipeptidyl-peptidase (DPP)-4 inhibitors and glucagon-like peptide (GLP)-1 analogues for
prevention or delay of type 2 diabetes mellitus and its associated complications in people at increased risk for the development of type 2 diabetes mellitus.
Hemmingsen B. Cochrane Database of Systematic Reviews 2017;(5):CD012204.
[There is no firm evidence that DPP-4 inhibitors or GLP-1 analogues compared mainly with placebo substantially influence the risk of T2DM and especially its associated complications in people at increased risk for the development of T2DM. Most trials did not investigate patient-important outcomes.]
Freely available online

Foot ulceration in patients with diabetes: a risk analysis.
[This study aimed to analyse factors associated with the risk of ulceration in the feet of patients with diabetes using a conceptual hierarchic model. It was a cross-sectional study carried out with 1515 people with diabetes mellitus aged 40 years and older. The risk of foot ulceration was greater in male patients with diabetes, who did not practise a regular physical activity, with time since diagnosis over 10 years, who used insulin, with retinopathy who had had a previous stroke.]
Available with an NHS OpenAthens password for eligible users

Fracture risk in patients with type 2 diabetes mellitus and possible risk factors: a systematic review and meta-analysis.
[Our findings strongly support an association between T2DM and increased risk of overall fracture. These findings emphasize the need for fracture prevention strategies in patients with diabetes.]
Freely available online

Pre-conception care for women with type 1 or type 2 diabetes: A mixed methods study exploring uptake of pre-conception care.
[Reconceptualising pre-conception care to place greater emphasis on pregnancy planning, fertility and contraception would reduce some of the existing barriers to uptake.]
Freely available online

Guidelines

The following new guidance has recently been published:

Type 2 diabetes in adults: management.
National Institute for Health and Care Excellence (NICE);2017.
https://www.nice.org.uk/guidance/ng28
[In May 2017 we added text on sodium–glucose cotransporter 2 (SGLT-2) inhibitors to the section on initial drug treatment. We also updated the algorithm for blood glucose lowering therapy in adults with type 2 diabetes to revise footnote b with links to relevant NICE guidance on SGLT-2 inhibitors, and added new information on SGLT-2 inhibitors to the box on action to take if metformin is contraindicated or not tolerated.]
Freely available online

If you need help getting hold of the full text of anything here then please email me back.
For more information about the KnowledgeShare Current Awareness service contact me using the details below.

Mary