

Emergency Insulin Pump Information



Thankfully, insulin pump mechanical failures are rare. If a pump does stop working it may stop giving you insulin. It's important to remember that people using insulin pumps do not have any long acting insulin to act as a safety net. This can mean **if your pump breaks you are at risk of developing Diabetic Ketoacidosis (DKA) very quickly** (within a few hours) so, it's really important you have a plan in place and know what to do if this happens.

How do I know if my insulin pump is not working as it should ??

Pumps have a number of safety features which alert the user to the fact a problem is detected for the most part. However, there may be some problems that the Insulin pump may not be able to immediately detect.

Sometimes an early indication of a failing /broken insulin pump maybe an unexpected rise in blood glucose and or symptoms of high blood glucose (e.g. thirst, passing lots of urine, exhaustion etc.).

It is vitally important that you take action If hyperglycaemia occurs (regardless of the cause) to avoid ketones developing (DKA) .

What Should I do if my pump malfunctions??

First - contact your pump device manufacturer :-

Sometimes certain technical issues can be resolved over the telephone with the manufacturer's trained support staff.

If the manufacturer care line confirms your insulin pump has failed you will need to use injections until the pump is repaired or replaced.

Reverting To Insulin Injections

You will need to use your back up **QUICK ACTING** (e.g. *Novorapid, Humalog, Apidra, Fiasp*) Insulin for meal/food boluses and any correction doses



Insulin Pump Device Helplines (24 hours)

Animas UK and Ireland (Animas Vibe) :
0800 055 6606

Roche (Accucheek Insight or Combo) :
0800 731 2291

Medtronic: (Mini-med Veo or 640g) :
01923 205 167

Cellnovo:
0203 058 1250

My Life (Omnipod / My Life /Ypsopump) :
0344 856 7820

If you are going to be off your pump for longer than 6 hours you will need to use your **BACKGROUND** insulin (examples include Lantus, Levemir, Humulin I etc.)

If the pump fails and replacement is going to take longer than a day, you will need to use the personalised plan agreed with your healthcare professional to keep you safe until your replacement / repaired pump arrives.

Top Tip: Have an agreed & prepared plan in place with your local diabetes team to manage such situations as pump breakdown !



Educate



Empower



Evaluate



Evolve

I don't have a plan and I don't know how much insulin to take, what can I do??

First thing **"DON'T PANIC"**. Contact the insulin pump company support line for your device in the event of a pump breakdown/issue. This will either resolve the situation/error over the phone or they will organise a replacement device to be sent out as soon as possible* (*provided your device remains in the agreed warranty period- usually four years).

Insulin Pumps Wales would **ALWAYS** advocate that you have an agreed prepared plan in place with your local diabetes team to manage such situations as pump breakdown. In the event that you don't have this information to hand for any reason, the guide below can be used to keep you safe until you **either** receive a replacement device **OR** are able to speak to your health care team to get more specific support.

Working Out Quick Acting Insulin Dose Requirements

For all meal boluses and corrections use your usual insulin to carbohydrate ratio (I:C) and Insulin sensitivity factor(s) (ISF).

Working Out Background Insulin Dose Requirements

The basal rate from your pump can be used to determine your long acting dose of injectable insulin in the event of a pump failure. Some people take this as one whole dose once every 24 hours, others may be advised to split the total long acting daily dose in two and take twice daily (at breakfast and bedtime). **If you are unsure it is really important that you check this with your team as soon as you are able** to make sure that in the event of having to revert to injections you know exactly what you should do! **Being prepared is the key!!!**

Some people may require a higher (anything up to 10- 20%) additional long acting insulin dose requirement via injection than they would usually on an insulin pump. **This is something you should check and confirm with your team if you are you are unsure.**

Important!

If you are reading this and are currently in a crisis/emergency situation and are not sure what to do: the safest option is to use the total basal dose you would usually have in your pump over 24 hours to inform how much background insulin you should inject within a 24-hour period. This will help to prevent diabetic ketoacidosis (DKA). You can get the information on your 24 basal rate from your Insulin Pump, computer/cloud (from a recent insulin pump download) or from a written back up sheet.

Top Tip- Always ensure you have back up insulin available in case of an emergency! It is important that the back up insulin is **in date** and that you have back up Insulin pen devices and supply of pen needles. It is important to keep a written record of your pump settings and store them somewhere safely as a reference/guide. (A Free Template is available to Download on our Resources page.)

Disclaimer- This information leaflet is for **emergency use only** as a guide The information above is **not intended to replace** the advice given to you by your own Health Care Professional. **Always** discuss any proposed changes to treatment with your team for your own safety and well being. **Thank you!**



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