Integrated Care System
Nottingham & Nottinghamshire

Information on Hybrid Closed Loop (HCL) for People with Type 1 Diabetes

Frequently Asked Questions

This leaflet provides information for people living with type 1 diabetes and their families or carers about Hybrid Closed Loop (HCL) systems, a newer way of managing diabetes.

Q: What is a Hybrid Closed Loop (HCL)?

A: A Hybrid Closed Loop system uses an insulin pump and a continuous glucose monitor (CGM) that communicate with each other. This is done through a computer algorithm, either on a smartphone or within the pump.

Some people refer to HCL as an “artificial pancreas”. However, users still need to take an active role, for example by entering carbohydrate information for meals.

Q: Will everyone with type 1 diabetes have access to a HCL system?

A: No, not everyone with type 1 diabetes will be offered HCL. NICE and NHS England recommend HCL systems for specific groups of people. Eligibility is based on national guidance and an individual clinical assessment.

HCL has been recommended for adults living with type 1 diabetes who:

- Have an HbA1c of 58 mmol/mol (7.5%) or above, **or**
- Experience disabling hypoglycaemia despite best possible management

This is usually alongside at least one of the following:

- An insulin pump
- Continuous glucose monitoring (CGM), such as Dexcom or Freestyle Libre

HCL is also recommended for:

- Children and young people under 18 years
- People who are pregnant or planning pregnancy

Q: How will I know if I am eligible for HCL?

A: NICE recommends HCL for some people with type 1 diabetes who are finding it difficult to achieve good glucose control with current treatments.

Your individual circumstances and clinical needs will be assessed by your diabetes specialist team. If HCL may be beneficial, it will be discussed with you during a routine appointment.

Q: How long will I have to wait if I am eligible?

A: It may take some time before HCL systems are available to everyone who is eligible. This is because services need to safely introduce the technology and provide appropriate training and support.

Access is being rolled out in phases, with priority given to groups who are likely to benefit most, such as children, young people, and pregnant women.

Q: Do I need to contact my Diabetes team?

A: If you are already under the care of a diabetes specialist team, they will review your eligibility and discuss this with you at your next appointment.

If your care is currently managed in primary care, you can request a referral to a diabetes specialist at your annual review.

Your specialist team will consider all available options to support your diabetes management before recommending HCL.

Q: Why will it take up to 5 years to fully implement HCL?

A: NICE has agreed a five-year implementation period to:

- Allow healthcare professionals to receive appropriate training
- Ensure safe and effective initiation of HCL systems
- Provide ongoing support to people learning to use the technology

A phased approach helps ensure fair and equitable access.

Q: Which HCL systems will you be offering?

A: Several HCL systems approved for NHS use are available. The system offered will depend on:

- Clinical suitability
- Local pathways
- Device compatibility

Your diabetes team will discuss suitable options, including benefits, limitations, and responsibilities.

Q: I have been contacted by a device company - what should I do?

A: You do not need to do anything. At your next review your clinical team will discuss if HCL would benefit you, and if it does, the NHS will provide the necessary equipment.

You should not purchase CGM or pump equipment privately without first discussing this with your diabetes specialist team.

Q: Where can I find out more information about HCL?

A: You can find further information from:

- NHS England » Hybrid closed loop technology
- Diabetes UK information on Hybrid Closed Loop
- NICE guidance on Hybrid Closed Loop
- Hybrid closed loop technology (artificial pancreas) | Breakthrough T1D UK

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