Is an insulin pump not superior to injections for children with newly discovered diab

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There is currently a trend to start the treatment of children with type 1 diabetes mellitus with a subcutaneous insulin pump, rather than with the conventional insulin injections. No clear evidence exists whether this is an improvement. There are indeed some reasons to assume that this might constitute an improvement. An insulin pump allows more accurate administration of smaller quantities of insulin, and it is supposed to more accurately imitate the natural release of insulin. Recent research, however, shows that an insulin pump does not differ from conventional injections in terms of serum HbA$_1c$ levels. The number of hypoglycaemia events did not decrease and the quality of life was not improved. The costs are almost twice as high, and the use of the device requires knowledge, understanding and skills. All in all, there appear to be (as yet) insufficient arguments for recommending the insulin pump as the primary treatment option for children with diabetes.

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Literature references

Authors

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