



NOW

MORE PATIENTS CAN DO IT

WITHOUT FINGERPRICKS*

Frequency of SMBG with fingerprick testing falls far short of recommendations^{1,2} in patients with diabetes in India

Recommendation
2-3 times /day

vs

In real life
3-4 times /week

Pain and inconvenience of fingerpricks – A concern in 60% of patients with diabetes in India³

Why prick, when you can scan?#

The FreeStyle Libre system liberates a broad range of patients with diabetes from the hassles of fingerprick testing^{†, ‡}



No finger prick calibration entry



Easy way to check glucose with a painless one second scan[†]



Automatically measures, captures, and stores glucose data day and night for up to 14 days[†]

The FreeStyle Libre system is proven to result in better clinical outcomes



Increases Time in Range[§]



Reduces Hypoglycemia[¶]



Decreases A1c[‡]



Improves Quality of Life[¶]



Decreases Hospital Admissions^{¶¶}



Decreases Work Absenteeism[¶]



*Fingerpricks are required if glucose readings do not match symptoms or expectations. † Scanning the sensor does not require fingerpricks; SMBG=Self Monitoring of Blood Glucose. ‡Finger pricks are required if glucose readings do not match symptoms or expectations. ‡ Sensor has to be scanned at least once every 8 hours. ‡ Sensor is water resistant to up to 1 meter (3 feet) of water. Do not immerse longer than 30 minutes. † FreeStyle Libre system performance data sheet. †† The reader can capture data from the sensor when it is within 1 cm to 4 cm of the sensor. 1. Rao PV, Makkar BM, Viswanathan. ISGSD consensus on self-monitoring of blood glucose in types 1 and 2 diabetes mellitus in India. International Journal of Diabetes in Developing Countries. 2016;36:260-271. 2. Joshi SR. Glycemic Variability and Ambulatory Glucose Profile in Indian Diabetics. 3. Kaveraveer J, Ramasubramanian L, Krishnar G. Glucose monitoring technologies – complimentary or competitive? Role of continuous glucose monitoring versus flash glucose monitoring versus self-monitoring of blood glucose. J Diabetes 2017;8:61-7. 4. Hoek T, Hermans H, Ajan R, Hermans N, Riveline JP, Rayman Q. Flash glucose-sensing technology as a replacement for blood glucose monitoring for the management of insulin-treated type 2 diabetes: a multicenter, open-label randomized controlled trial. Diabetes Ther. 2017;9(1):55-72. 5. Bolinder J, Artuna R, Geelhoed-Duylvestin P, Kröger J, Weitgasser R. Novel glucose-sensing technology and hypoglycaemia in type 1 diabetes: a multicentre, non-masked, randomised controlled trial. Lancet. 2016;388(10057):2254-2263. 6. Hazek T, Hermans H, Ajan R, Hermans N, Riveline JP, Rayman Q. Flash glucose-sensing technology as a replacement for blood glucose monitoring for the management of insulin-treated type 2 diabetes: a multicenter, open-label randomized controlled trial. Diabetes Ther. 2017;9(1):55-73. 7. Yarnoff M, Robman E, Anaron-Horowitz G, et al. Effect of flash glucose monitoring technology on glycaemic control and treatment satisfaction in patients with type 2 diabetes. Diabetes Care. 2019;42(7):1178-1184. 8. Folkert M, van Dijk P, Edens M, et al. Improved well-being and decreased disease burden after 1-year use of flash glucose monitoring (FLANGLAS). BMJ Open Diabetes Care. 2019. <https://doi.org/10.1136/bmjopen-2019-000805>. 9. Chariker S, De Block C, Van Huffel L, et al. Quality of life and glucose control after 1 year of nationwide reimbursement of intermittently scanned continuous glucose monitoring in adults living with type 1 diabetes (FUTURE): a prospective observational real-world cohort study. Diabetes Care. 2020;43(2):389-397.