

Is pumping right for me?



Great expectations

That is a decision you will need to make in conjunction with your healthcare professional, but below are a few things to consider to ensure that you have realistic expectations about pump therapy.

Starting pump therapy is a process. Even if you know a great deal about diabetes management, you will still need to learn how to apply your knowledge specifically to pump therapy.

For example, although you have been treating high blood glucose while on injections, you will need to adjust this plan once you begin pumping. And even if you have had diabetes for many years, you will need to learn a lot of new information before you begin pump therapy.

You probably have heard a lot about pump therapy from your physician, diabetes educator, other pumpers, and the Internet. With all this information, it may be helpful to think about your personal goals for pump therapy, and to ensure that you have realistic expectations.

Take a minute to do the following activity. Choose the following statements below that you believe apply to starting pump therapy:

1. I will probably feel better on a pump than on injections.
2. I won't have to carry diabetes "stuff" anymore.
3. I will have more flexibility with my meal schedule.
4. I can eat whatever I want.
5. I won't have to check my blood glucose (BG) as frequently since the pump will keep my BG stable.
6. I will be "fine-tuned" within a week of starting.
7. I will have better BG management.
8. Now that I have my pump, I should be pumping any day now.
9. I won't have the highs and lows like I did on injections.
10. It will take several weeks to months to adjust to pump therapy.

If you checked numbers 1, 3, 7 and 10, you have reasonable expectations of pump therapy. If you checked numbers 2, 4, 5, 6, 8, and 9, you should have further discussions with your physician, diabetes educator and/or pump trainer before getting started.

Are there any downsides to pumping?

Although there many advantages to pump therapy, you'll need to take the following into consideration:

- The cost of your pump will depend on your insurance coverage. Your ongoing supplies needs will also be greater than when you were just on injections, as you will need to purchase infusion sets, cartridges, batteries, and skin preparation wipes, along with any accessories you may like such as pump skins or carrying cases.

- You will be attached to your pump most of the time. If you want to disconnect for more than an hour, you'll need to have a good understanding of what you need to do to keep your BG under reasonable control during this time. Work with your healthcare provider on a plan that works for your specific needs.
 - When pumping, high BG must be taken seriously as insulin pumps deliver only short or rapid-acting insulin. Without any long-acting insulin "on board," BG can rise quickly if the insulin flow is accidentally interrupted and a condition called diabetic ketoacidosis (DKA) can develop.
 - Before starting on a pump, many people express a fear or dislike of "being connected" to something all the time. While it definitely requires some adjustment, most pumps are small and discreet enough to be kept in a pocket or clipped on a belt, and how you wear your pump is a matter of comfort and personal choice.
- Switching from multiple daily injections to a pump is a significant therapy adjustment. You will need to work with your healthcare team to evaluate such a decision, weigh the pros and cons carefully, and ensure that your expectations are realistic and aligned with your lifestyle and blood glucose management goals.