



**FIG 28-3** School-age children are able to administer their own insulin.

### **Continuous subcutaneous insulin infusion.**

Some children are considered candidates for use of a portable insulin pump, and even some young children with unsatisfactory metabolic control can benefit from its use. The child and the parents are taught to operate the device, including the mechanics of the pump, battery changes, and alarm systems. A number of devices are on the market that vary in the basal rates they are able to deliver and in the cost of the equipment. Families can investigate the various devices and select the model that best suits their needs. Product information is available from pump manufacturers and distributors.\*

Parents and children learn (1) the technical aspects of the pump and SMBG; (2) prevention and treatment for hyperglycemia, sick-day management, and meal planning; (3) the effects of exercise, stress, and diet on blood glucose levels; and (4) decision-making strategies to evaluate blood glucose patterns and make adjustments in all aspects of the regimen.

Numerous blood glucose measurements (at least four times per day) are an essential part of infusion pump use. Intensive education and supervision are critical to obtaining maximum efficiency and control. This is particularly important if the family has been accustomed to a conventional insulin regimen. They must realize