**P48** DOES FLASH GLUCOSE MONITORING IMPROVE PATIENT SATISFACTION, SELF-MANAGEMENT & OVERALL HBA1C IN 12–16 YEAR OLD PATIENTS WITH SUBOPTIMAL CONTROL?


10.1136/bmjpo-2019-RCPCH-SAHM.52

**Introduction** Type 1 diabetes requires significant self-management including regular glucose testing, calculating appropriate doses of insulin, self injecting and preventing complications such as hypoglycaemia, diabetic ketoacidosis and long term end organ changes. Adolescents have motivation but are also vulnerable in terms of making well balanced choices and self advocacy. The Flash Glucose monitoring system is a device that measures interstitial glucose level by scanning the sensor placed upon the arm. By scanning frequently there is more awareness of interstitial glucose levels which intuitively should improve overall self management. it also reduces the need to check blood sugars causing less finger pricks. Less motivated improve overall self management. it also reduces the need to

**Methods** Flash glucose monitoring was made available to all patients with type 1 diabetes who fulfilled set criteria and after completing a training session. We included 12–16 year olds with HbA1c 69 mmol/mol (8.5%) and above. Demographic details were recorded. We monitored their HbA1c at 3 and 6 months from starting flash glucose monitoring. We also asked them 2 questions:

- Do you feel the flash glucose monitoring system has made it easier for you to manage your diabetes on a day to day basis
- Do you think it will improve your overall HbA1c level?

**Results**

- 24 patients aged 12–16 years had HbA1c above 69 mmol/mol
- 8 were eliminated either due to recent diagnosis of type 1 diabetes (3) or refusal to use Libre (5) therefore N=16.
- Median HbA1c before starting Libre= 78 mmol/mol (mean=85), at 3 months 86 mmol/mol (mean=85) and 6 months 73 mmol/mol (mean 73) p=0.016
- At 3 months all felt Libre made it easier to manage day to day sugar levels

**Conclusion** There was a significant fall in HbA1c (P=0.016) 6 months after using Flash Glucose monitoring.

**P49** CYPROHEPTADINE AS AN APPETITE STIMULANT IN THE TREATMENT OF FEEDING DISORDERS

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10.1136/bmjpo-2019-RCPCH-SAHM.53

**Background** Cyproheptadine is an antihistamine with appetite stimulant side-effects. Our service has used Cyproheptadine for feeding disorders in a limited number of patients since 2013 when effects of first line psychological intervention had been limited. Indications were persistent underweight and failure to tube wean. Here we present carer feedback and growth data from with its use.

**Methods** Retrospective data from all children using Cyproheptadine from 2013-2017 as part of a registered service assessment. Parents completed online questionnaires on their perceived benefits and difficulties using cyproheptadine. Growth data at time from initiation and 6 months reviews was retrieved from patient charts for underweight children.

**Results** 10 children were prescribed Cyproheptadine, 8 for underweight and 2 to support gastrostomy tube weaning. 2 patients ceased the medication soon after starting (1 due to side effect; 1 due to parental perceived poor efficacy). 9 parents (90%) completed the patient satisfaction survey. There were no serious side adverse effects reported. 8 (88%) of parents said it improved interest in food, and 8 (88%) in amount eaten. Of the 6 children using Cyproheptadine for underweight both weight z-score and BMI z-score had increased at 6 month follow-up compared to baseline (weight z-score median -2.9 to -2.5 (p=0.03); BMI z-score -3.4 to -2.5 (p =0.04))

**Conclusions** From our small number of patient data, Cyproheptadine appears to be safe, effectively improves appetite and quantity eaten by a majority of parents; and also appears to have a positive impact on weight gain in feeding disorders. Further study of its use in this group is needed.

**P50** THE INTERNATIONAL ASSOCIATION FOR ADOLESCENT HEALTH- THE YOUNG PROFESSIONALS NETWORK: THE LEADERSHIP AND MENTORSHIP COMMITTEE

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10.1136/bmjpo-2019-RCPCH-SAHM.54

**Aims/Objectives**

- Provide diverse opportunities for early career professionals to advance their knowledge, skills and experience in global adolescent health.
- Promote collaboration and build relationships between early career professionals and more experienced professionals and leaders in adolescent health.

**Background** The IAHA is a multidisciplinary, non-government organization with a broad focus on youth health (10-24 years), IAAH was established in 1987 and is committed to the principles of youth empowerment in all aspects of its affairs and supports the United Nations Convention on the Rights of the Child (1989). Our goal at present is to launch a Young Professionals Network.

**Results** The International Association for Adolescent Health (IAAH) Young Professionals Network (YPN) is a multidisciplinary community of students, trainees, early career professionals (including health care providers, researchers, public health practitioners, advocates, scientists, social workers, pharmacists) who are interested in improving the health of adolescents locally, nationally, and globally. The group provides a forum for members to share training opportunities in adolescent health and supports networking, mentorship, and leadership development for trainees and early career professionals. The YPN consists of the following committees:

- Leadership and Mentorship
- Education and Training