Importance to 'patients' or the population	One of known factors determining the use of CGM devices amongst children and young people with type 1 diabetes is sensitivities to the device, for example local skin reactions to the adhesive used in the sensor. Further research is needed to investigate strategies to reduce local skin reactions to promote ease of use and adherence of these devices.
Relevance to NICE guidance	This will help improve implementation of the updated recommendations
Relevance to the NHS	It will be possible to recommend the adhesives that produce the fewest sensitivities to children and young people. This may increase uptake and adherence to CGM devices in this group, thereby helping them to control their blood glucose levels more effectively.
National priorities	Low
Current evidence base	There is currently no evidence for CGM for children and young people with type 2 diabetes
Equality considerations	The current updated recommendations extending CGM to all children and young people with type 1 diabetes would help remove the observed discrepancies in clinical practice and address known inequalities in access. For example, those from lower socioeconomic groups or those from black, Asian and minority ethnic minority groups who from their clinical experience have been less likely to be prescribed these devices. A reduction in sensitives to the CGM device will promote adherence to children and young people with type 1 diabetes.