

## NHS Low Calorie Diet (LCD) Programme Consultation Checklist

The NHS Low Calorie Diet Programme is an evidence-based intervention using Total Diet Replacement (TDR) to support people recently diagnosed with Type 2 diabetes to achieve significant weight loss and potentially attain diabetes remission (non-diabetic HbA1c results, at least 6 months apart, off all glucose-lowering medicines). There is no cost to participants with all TDR (usually shakes) funded by the NHS.

In Humber, Coast & Vale this service is provided by Oviva. The programme is delivered digitally by a Diabetes Specialist Dietitian (DSD) over 12 months with all appointments happening over phone/video calls, or via secure app messaging. Participants will not need to travel to a specific location for appointments, and can book an appointment when it is convenient for them.

Participants will be paired with their own personal DSD to provide expert one-to-one healthcare wherever they need it, with tailored support throughout every stage of the programme.

Oviva accepts motivated participants following a thorough eligibility check.

The intervention includes:

- 12 week Total Diet Replacement (TDR) using 4 nutritionally complete meal replacement products
- 4 week food reintroduction
- 8 month maintenance period
- A reset phase if required (if participants gain more than 2kg they have the opportunity to access additional dietetic support and follow the TDR for an additional four weeks)

The participant will have access to a guidebook and online learning portal including advice on diabetes specific diets which are culturally adapted, and interactive resources including education on managing weight, sleep and keeping active.

**Individuals who satisfy all the following eligibility criteria may be referred to the Service.**

**Complete this eligibility checklist with your patient during their consultation:**

- Aged 18 to 65 years (inclusive)
- Diagnosed with Type 2 diabetes within the last 6 years
- Is not a current insulin user
- BMI  $\geq 27\text{kg/m}^2$  (adjusted to  $\geq 25\text{kg/m}^2$  or higher in people of black, Asian and minority ethnic origin)
  - BMI obtained from self-measured weight is acceptable for referral. If this cannot be obtained, a clinic-measured value within the last 12 months may be used, provided there is no concern that weight may have reduced since last measured such that the individual would not be eligible for the LCD programme at present.
- HbA1c measurement taken within the last 12 months, in line with the following:
  - If on diabetes medication, HbA1c 43-87 mmol/mol

- If not on diabetes medication, HbA1c 48-87 mmol/mol
- If there is any concern that HbA1c may have changed since last measured, such that repeat testing may indicate that the individual would not be eligible for the LCD programme at present, HbA1c should be rechecked before referral is considered
- Must have attended for monitoring and diabetes review when last offered, including retinal screening, and commit to continue attending annual reviews, even if remission is achieved
- Is not currently pregnant or planning to become pregnant within the next 6 months
- Is not currently breastfeeding
- Does not have any of the following significant comorbidities:
  - active cancer
  - heart attack or stroke in last 6 months
  - severe heart failure (defined as New York Heart Association grade 3 or 4)
  - severe renal impairment (most recent eGFR  $\leq$  30mls/min/1.73m<sup>2</sup>)
  - active liver disease (not including NAFLD)
  - active substance use disorder
  - active eating disorder
  - porphyria
  - known proliferative retinopathy that has not been treated
- Had not recently lost greater than 5% body weight
- Is not currently on a weight management programme
- Has not undergone / is not awaiting bariatric surgery (unless willing to come off waiting list)
- Health professional assessment that the person is able to understand and meet the demands and monitoring requirements of the NHS LCD Programme

#### Responsibilities of the referring GP practice:

- Identify eligible patients and offer referral as appropriate
- Provide information on concept of remission of Type 2 Diabetes, the LCD service and potential risks and benefits to obtain informed consent
- Discuss medication changes to take place on first day of TDR and provide written confirmation of these change to the patient and Provider: **please see the Referral Form for more information**
  - Respond to any clinical need to further adjust medications according to capillary blood glucose and blood pressure monitoring by the Provider
  - Respond to adverse events if patient contacts practice directly with an urgent clinical need or is directed to the GP practice by the Provider
  - Arrange review of patient at 6 months and 12 months after starting LCD programme with repeat HbA1c – with further medication adjustment as necessary.

#### How to refer:

After confirming eligibility and discussing the service with your patient for the pathway please complete the referral form which is embedded into your clinical system and send it to:

[ovivauk.lcd@nhs.net](mailto:ovivauk.lcd@nhs.net)