

Prof Angus Forbes

## BIOG

Professor Angus Forbes holds the FEND Chair of Clinical Diabetes Nursing at King's College London and holds an honorary post as a specialist diabetes nurse at King's College Hospital. Prof Forbes is an active researcher with multiple publications in diabetes, some current and previous projects include: a pan European survey of diabetes nurses on the impact of COVID-19; diabetes prevention in women with GDM; preconception care in women with Type 2 diabetes; evaluating a psychologically modelled education intervention for young people with Type 1 diabetes; developing supportive interventions for adults with new-onset Type 1 diabetes; the relationship between cognitive impairment and diabetic retinopathy; glycaemic variability and mortality and older people with diabetes; the impact of lipohypertrophy on glucose variation in people with Type 1 diabetes; and a trial of virtual clinics to improve primary care based diabetes outcomes. Clinically Angus runs a motivational enhancement clinic for people with Type 1 diabetes. He also leads on the diabetes MSc programme for diabetes nurses (ENDCUP) as part of his role in supporting FEND as well as supervising FEND PhD fellows. He has contributed to national guidelines for older people in hospital, end-of-life-care; and dementia care for people with diabetes. Angus is a past vice-president of the International Diabetes Federation, and his previous positions include: senior lecturer in diabetes at King's College London; a lecturer in health services research at University College London Medical School; and a health visitor and district nurse in East London.

## ABSTRACT

### **Lipohypertrophy- the forgotten complication of diabetes.**

Lipohypertrophy (LH) occurs with repeated exposure to insulin injections in the subcutaneous tissue. Subcutaneous insulin exposure can increase tissue density with hypertrophy and hyperplasia of adipocytes. The effect of insulin when injected into an LH area can be attenuated, potentially leading to glucose variability. Thereby, potentially increasing the risks of diabetes complications, hypoglycaemia and individual distress.

In this presentation I will present the findings of study that has used ultrasound examination of LH areas to characterise the features of LH in the subcutaneous tissue of people with Type 1 diabetes. From this work we have produced an integrated model that may help us understand the complex features of LH and its progression. I will also outline what we have learned about assessing LH and its impact on glucose variability. I will conclude by considering the potential clinical implications of the study for diabetes nurses and how we can respond in addressing this important and often forgotten problem.