

IRRITATED OR SENSITIVE SKIN

If you have irritated or sensitive skin please work with your healthcare professional (HCP).

This is a summary of a clinical article published by clinicians independent from Dexcom based on their knowledge and experience.* Dexcom has not tested these approaches nor do we endorse these specific approaches. For detailed step-by-step instructions on how to use the Dexcom G6® Continuous Glucose Monitoring (CGM) System, please refer to the user guide.

Do you have irritation at the sensor site or sensitive skin? These considerations, skin barriers, and professional tips may help. Remember what works best for one person may not work best for everyone. You may need to try several different products or methods for you and your HCP to figure out what works best.

General consideration

- Clean skin with oil-free, antimicrobial soap and dry thoroughly^{1,2}
- Gentle exfoliation recommended for oily skin²
- Trim hair with dry razor if needed³
- Do not use any lotion or oil containing moisturizer where you insert the sensor
- Do not insert sensor immediately after a shower/bath or in a steamy bathroom—minimize humidity with hairdryer or application in a dry environment²
- Solid or spray antiperspirant (unscented) may help with skin prone to sweating. Create an empty oval on the skin with the antiperspirant, wait 10–15 min. Insert sensor on clean skin in center of oval.^{1,2}

Barrier Films

- Barrier films may help prevent mild skin irritation from adhesives⁴
- Create an empty oval on the skin with the barrier film and insert sensor on clean skin in center of oval
- Let barrier film dry completely before placing sensor^{1,4}
- May apply 1 layer or a second after first layer has dried^a

Product	Advantages	Professional tips
Smith and Nephew IV Prep	<ul style="list-style-type: none"> - Waterproof, breathable barrier film - Also contains alcohol for antiseptic properties 	<ul style="list-style-type: none"> - Comes in wipes - Let dry completely on skin - Not marketed as having tackifying properties, but may see mild enhancement to adhesion^a
Bard® Protective Barrier Film	<ul style="list-style-type: none"> - Waterproof, breathable barrier film 	<ul style="list-style-type: none"> - Comes in wipes or spray - Does not include antiseptic
SurePrep™ (Medline)	<ul style="list-style-type: none"> - Vapor permeable barrier film - Includes antiseptic 	<ul style="list-style-type: none"> - Comes in wipes - Can be used on damaged skin as protection
Smith and Nephew Skin prep/no-sting skin prep	<ul style="list-style-type: none"> - Waterproof, breathable barrier film - Popular choice due to moderate protection and moderate adhesive properties combined^a 	<ul style="list-style-type: none"> - Comes in wipes or spray - Skin prep indicated for intact skin, no-sting skin prep indicated for intact or damaged skin - Does not include antiseptic
Cavilon™ No Sting Barrier (3M™)	<ul style="list-style-type: none"> - Waterproof, breathable barrier film 	<ul style="list-style-type: none"> - Comes in wipes or spray - Does not include antiseptic
AllKare® Protective Barrier Wipe	<ul style="list-style-type: none"> - Waterproof, breathable barrier film 	<ul style="list-style-type: none"> - Comes in wipes - Does not include antiseptic

Barrier Patches and Bandages

- Use barrier patches and bandages only if barrier film did not work for you
- **Dexcom has not tested the use of barrier patches and bandages.** Talk to your healthcare professional about the use of barrier patches and bandages.
- When used as a barrier, patches/bandages must be placed underneath the sensor adhesive patch^{2,5,6}
- Place on skin before sensor adhesive
- Cut an empty oval in the patch/bandage and insert sensor on clean skin in center of oval

Product	Advantages	Professional tips
IV3000 (Smith&Nephew)	<ul style="list-style-type: none"> - Transparent, thin film, precut patch - May be less irritating than sensor adhesives 	<ul style="list-style-type: none"> - May also be used as an adhesive enhancer when placed over sensor tape - More prone to peel with water, sweating, humidity^a - Many patients report less skin reaction with IV3000 compared with Tegaderm^a
Tegaderm or Tegaderm HP	<ul style="list-style-type: none"> - Transparent, thin film, precut patch 	<ul style="list-style-type: none"> - HP stands for “Holding Power” and may adhere more strongly than standard Tegaderm - May also be used as an adhesive enhancer when placed over sensor tape - More prone to peel with water, sweating, humidity^a
Opsite/Flexifit (Smith&Nephew)	<ul style="list-style-type: none"> - Roll of thin transparent film can be cut to size 	<ul style="list-style-type: none"> - May also be used as an adhesive enhancer when placed over sensor tape
Hydrocolloid dressings: - DuoDERM® - Toughpads - (Dynarex) Dynaderm™	<ul style="list-style-type: none"> - Hydrocolloid provides thick protection - Waterproof - Some brands have “extra thin” version - Some latex free 	<ul style="list-style-type: none"> - Offers stronger barrier protection than an adhesive patch, such as IV 3000 or Tegaderm
COMPEED® Plasters	<ul style="list-style-type: none"> - Absorbs moisture on skin, possibly aiding adhesion 	<ul style="list-style-type: none"> - Original intention as blister cushion - Adheres better after warming to skin temperature in hands before application^a

*This paper was based on: Messer L., & Beatson C., Preserving Skin Integrity with Chronic Diabetes Technology & Therapeutics Volume 20, Supplement 2, 2018.

1. Ives B, Sikes K, Urban A, et al.: Practical aspects of realtime continuous glucose monitors: the experience of the Yale Children’s Diabetes Program. Diabetes Educ 2010;36: 53–62.
 2. Chase HP, Messer L: Understanding Insulin Pumps and Continuous Glucose Monitors. 3rd ed. Denver: Children’s Diabetes Research Foundation, 2016.
 3. Karlin AW, Ly TT, Pyle L, et al.: Duration of infusion set survival in lipohypertrophy versus nonlipohypertrophied tissue in patients with type 1 diabetes. Diabetes Technol Ther 2016;18:429–435.
 4. McNichol L, Lund C, Rosen T, Gray M: Medical adhesives and patient safety: State of the science: consensus statements for the assessment, prevention, and treatment of adhesiverelated skin injuries. J Wound Ostomy Continence Nurs 2013;40:365–380; quiz E361–E362.
 5. Englert K, Ruedy K, Coffey J, et al.: Skin and adhesive issues with continuous glucose monitors: a sticky situation. J Diabetes Sci Technol 2014;8:745–751.
 6. Ives B, Sikes K, Urban A, et al.: Practical aspects of realtime continuous glucose monitors: the experience of the Yale Children’s Diabetes Program. Diabetes Educ 2010;36: 53–62.
- a Used within institution or support in public commentary, online articles, diabetes blogs, social media.

Failure to use the Dexcom G6 Continuous Glucose Monitoring System (G6) and its components according to the instructions for use provided with your device and available at <https://www.dexcom.com/safety-information> and to properly consider all indications, contraindications, warnings, precautions, and cautions in those instructions for use may result in you missing a severe hypoglycemia (low blood glucose) or hyperglycemia (high blood glucose) occurrence and/or making a treatment decision that may result in injury. If your glucose alerts and readings from the G6 do not match symptoms or expectations or you’re taking over the recommended maximum dosage amount of 1000mg of acetaminophen every 6 hours, use a blood glucose meter to make diabetes treatment decisions. Seek medical advice and attention when appropriate, including for any medical emergency.