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PATTERNS IN WORKING DAYS LOST BY PARENTS OF CHILDREN NEWLY-DIAGNOSED WITH TYPE 1 DIABETES (T1D).

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OBJECTIVES: Continuous subcutaneous insulin infusions (CSII) are an alternative to multiple daily injections (MDI) for glycaemic control and reducing the risk of developing long term microvascular and macrovascular complications in type 1 diabetes (T1D). The objective of this study as part of a randomised clinical trial (SCIPi, ISRCTN29255275) was to assess patterns of work-related absences, and whether a difference was apparent between treatment groups. **METHODS:** Patients between 7 months and 15 years of age, newly diagnosed with T1D were eligible to participate in this pragmatic, open, multicentre, parallel group, randomised, controlled trial. Parental work-related absences in days from the preceding 3-months were measured by parental interview at randomisation, 3, 6, 9 and 12 month intervals. **RESULTS:** Actual time taken off work was reported by parents and/or guardians for 78% of participants (CSII=113, MDI=117). Absence from work between randomisation and 12-month follow-up in parents of patients in the CSII group was 3.6 days (95% CI 2.3, 4.9) compared to 2.7 days (1.9 to 3.4) in the MDI group [difference in means of 0.9 days (95% CI -0.6, 2.5)]. In the 3-month period prior to randomisation, however, absence from work in parents of patients in the CSII group was 5.5 days (95% CI 4.7, 6.3) compared to 4.9 days (4.1 to 5.7) in the MDI group [difference in means of 0.6 days (95% CI -0.5, 1.7)]. **CONCLUSIONS:** T1D diagnosis for a child can have a temporary disruptive influence on parental work commitments. However, there is no evidence to suggest that one treatment is associated with any more or less work-related absences than the other.