LIFESTYLE



TYPE 2
DIABETES:

WHAT TO DO
WHEN YOU
ARE ILL

> WHY IS THIS LEAFLET FOR YOU?

Everyone has days when they are not well. If you have diabetes, being unwell can affect your blood glucose control so it is important that you know how to manage this. This leaflet will give you essential information on:

- How illness affects your blood glucose levels
- Looking after yourself
- What to eat and drink
- Managing your medication
- When to seek help

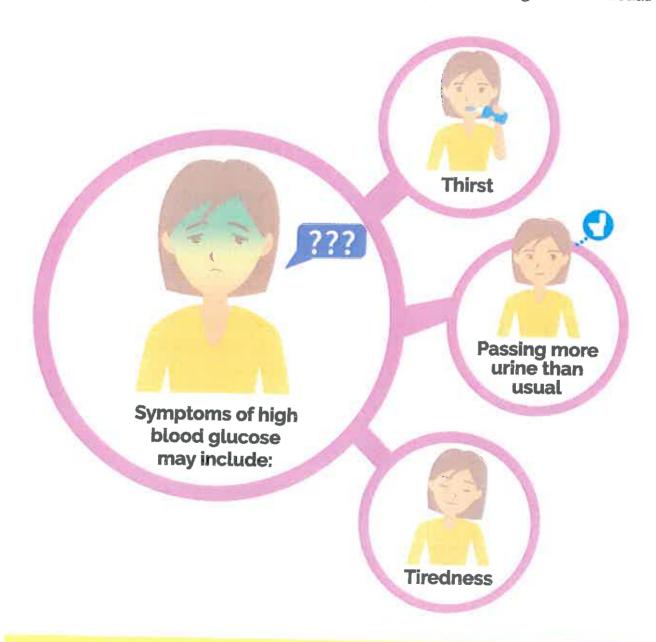


DIABETES

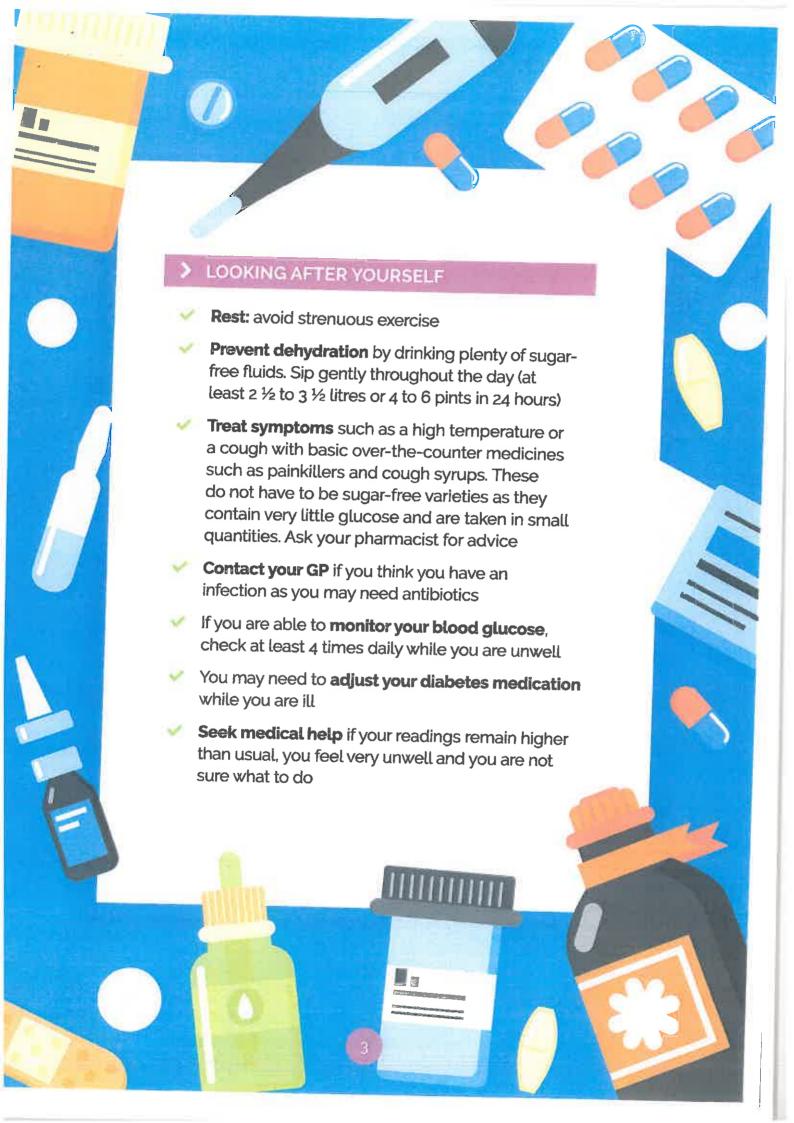
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> HOW DOES ILLNESS AFFECT YOUR BLOOD GLUCOSE LEVELS?

When you are ill, especially if you have an infection and high temperature, your body is less responsive to the insulin you produce naturally or may be injecting. Insulin is a hormone which controls your blood glucose. Being unwell therefore usually makes your blood glucose levels rise, even if you are eating less than usual.



A it is possible to manage your diabetes effectively during illness and keep your blood glucose levels in or near to target by following the simple advice given in this leaflet



> WHAT CAN YOU EAT AND DRINK?

Your body uses a lot of energy when you are unwell, even if you are resting. Try to eat as normal but if you cannot manage your usual meals, replace these with light and easily digested foods such as soups and milky puddings. See the table below for a list of alternative food options. Each portion is equal to approximately 10 gram carbohydrate (e.g. an eggsize potato, a small slice of bread or a tablespoon of cooked rice or pasta):





Fruit juice 100 ml

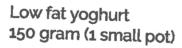
Milk 200 ml



Plain vanilla ice-cream 1 large scoop



Tomato soup 200 gram (half a large tin)







2 Rich tea or malted milk biscuits

MANAGING YOUR DIABETES MEDICATION

If you take diabetes tablets or a non-insulin injection and feel unwell:

Continue to take your tablets even if you are not eating. However:

- If you are taking metformin or an SGLT2 inhibitor and you are vomiting or have diarrhoea, you should stop this medication immediately as you may be at risk of dehydration. You will need a check for ketones if you take an SGLT2 inhibitor
- If you take a tablet which helps your body to produce more insulin, such as gliclazide, you may need to increase the dose or even need insulin injections for a short time while you are ill. You will need meal replacements if you are unable to eat normally
- Contact your GP if you feel like your symptoms are prolonged or getting worse
- If you are injecting a non-insulin glucose-lowering medication and develop acute abdominal pain, nausea and vomiting, stop the injections immediately and seek urgent medical attention

If you take insulin:

- Monitor and record your blood glucose levels at least four times a day (at mealtimes even if you are not eating your usual meals, and at bedtime)
- if your blood glucose readings are **higher** than usual, you may need to increase your insulin dose (see table on page 6). Contact your GP or diabetes nurse if you are not sure how to do this







If your blood glucose levels are **lower** than usual (because you are eating less than usual) you may need to reduce your insulin or any tablet you are taking which helps your body produce more insulin.

> MANAGING YOUR INSULIN DOSES DURING ILLNESS

If your blood glucose is persistently greater than 11 mmol/L, you will need to increase your insulin dose

| Constitution of the Consti | |
|--|--------------------------------|
| Blood glucose level | Additional insulin |
| 11.1 to 17 mmol/L | Add 2 extra units to each dose |
| 17.1 to 22 mmol/L | Add 4 extra units to each dose |
| Over 22 mmol/L | Add 6 extra units to each dose |

If you are taking more than 50 units in total daily, you should double the adjustments. All adjustments are incremental and should be reduced gradually as the illness subsides. Contact your doctor, practice nurse or diabetes specialist nurse for advice if you feel unsure about adjusting your insulin doses.

If your blood glucose levels are dropping down to 4 mmol/L or less, reduce your insulin dose by 10% (i.e. if your dose is usually 20 units, reduce by 2 units, if it is usually 40 units, reduce by 4 units). Make sure you have suitable "hypo" treatments available such as dextrose tablets, glucojuice or jelly babies



> WHEN TO SEEK HELP

Call your GP or diabetes specialist nurse for immediate help:

- If you are pregnant
- A If you have persistent vomiting and are unable to keep fluids down
- If you become drowsy and breathless
- If you have acute abdominal pain
- A If your condition worsens despite following the advice given in this leaflet

If you need to go to hospital, remember to take a list of all your medications and insulin safety card (if injecting insulin) with you



BEING PREPARED:

- Make sure you always have plenty of tablets/insulin and monitoring equipment especially in winter time, when people around you are unwell or you are travelling and may become ill
- Weep a few simple medicines such as painkillers and cough syrup in a safe place in the house
- Discuss how to manage your diabetes when you are unwell with your practice nurse or doctor so you know what to do if you become ill and when to seek help



> USEFUL RESOURCES:

A number of useful leaflets are available on the TREND-UK website including information about low blood glucose (hypoglycaemia), driving and diabetes, Type 2 diabetes and steroid treatment, diabetes and travel, and Type 2 diabetes and diabetic ketoacidosis.

TREND-UK: www.trend-uk.org
Diabetes UK: www.diabetes.org.uk
Diabetes UK: 60345 123 2399

