

Diabetes – How to manage illness

For adults with Type 2 diabetes taking
medication - including insulin

① For more information, please contact:

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Caring with pride

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What happens to my diabetes when I am ill?

When you are ill your blood glucose levels tend to increase even if you are unable to eat or are being sick. When you are ill your body's own insulin does not work as well. This means your blood glucose levels can become increased. As the glucose levels rise, you may develop symptoms of thirst or a dry mouth, or passing more urine than usual. You may also notice that you feel more lethargic. On rare occasions, if the glucose levels become too high, this could result in a medical emergency requiring hospital admission.

What should I do?

For advice on what to do about eating and drinking, follow the guidance in the 'Food and fluid intake when ill' section on page 8.

For advice on taking diabetes tablets and injectable treatments (not insulin), follow the guidance on page 5 and 6. Some people with type 2 diabetes monitor their blood glucose levels and they would notice a rise in these, as well as the symptoms above.

Your doctor or nurse may provide you with testing equipment ask you to test your blood glucose levels (up to 4 times a day) just whilst you are unwell.

If you take insulin, check your blood glucose and follow the guidance on page 7 and 8.

For people taking medication (but not insulin) for their diabetes

Generally advice is to continue with your usual diabetes medication, even if you are not eating as you normally do. Below is a list of common diabetes treatments and further information about whether you should continue taking or not.

Metformin

Continue taking as normal, unless you are severely unwell (e.g. diarrhoea, vomiting or fever) when it could be stopped temporarily. It should be stopped if you are so unwell you are unable to get out of bed.

Acarbose

Continue taking as normal, unless you are vomiting or have diarrhoea, when it could be stopped temporarily.

Gliclazide, Glimipiride, Glipizide, Nateglinide, Repaglinide

Continue taking as normal. If you are unable to eat or drink you may be at risk of hypo's (low blood glucose levels) so the dose may need to be reduced or stopped temporarily. If you are unable to eat, use sugary drinks such as fruit juice or full sugar cola to treat any hypo's.

Pioglitazone

Continue taking as normal. Seek medical advice if you are unusually short of breath.

Linagliptin, Saxagliptin, Sitagliptin, Vildagliptin, Alogliptin

Continue taking as normal. Seek medical advice if vomiting or severe abdominal pain.

Victoza, Trulicity, Lyxumia, Ozempic (injections)

Continue taking as normal. Seek medical advice if vomiting or severe abdominal pain.

Dapagliflozin, Empagliflozin, Canagliflozin

These tablets may increase the risk of dehydration, - symptoms include very dry mouth, feeling thirsty, feeling sleepy or tired and passing little or no urine. You may need to temporarily stop these if you become dehydrated.

Insulin adjustments when ill

If your blood glucose is less than 13mmol/l – take your normal insulin dose. If it is **more than 13mmol/l – take a larger insulin dose as directed below:**

- 13-17mmol/l – add 2 extra units to each dose of insulin
- 17-22mmol/l – add 4 extra units to each dose of insulin
- More than 22mmol/l – add 6 extra units to each dose of insulin

If you are taking more than 50 units a day in total, you should double these adjustments.

Once you have given this initial increased dose, contact your GP, Practice Nurse or Diabetes Specialist Nurse for advice if you feel unsure about adjusting your insulin doses further.

If you take Lantus (insulin glargine), you may notice that when you alter the dose, you do not see the effect the same day and may need to contact your GP, Practice Nurse or Diabetes Specialist Nurse for further advice.

Continue to test your blood glucose every 4 hours

If the level remains above 13mmol/l, follow the advice on page 7 for further insulin dose increases.

If the level is less than 13mmol/l, adjust the insulin back down to your normal doses.

The doses should be decreased again gradually as the illness subsides.

Food and fluid intake when ill

During illness you may not wish to eat normal meals. If this is the case, try to have alternative food or drinks that contain carbohydrate and are easy to digest, e.g. ice cream, milky drinks, soup.

Sip sugar-free fluids (at least 100ml each hour) to prevent dehydration.

If you are unable to eat, use sugary drinks such as fruit juice or full sugar cola to treat any hypos.

If you feel sick, you do not need to eat until you feel well enough to try, but keep sipping fluids to prevent dehydration.

What if things are not improving?

Seek urgent medical attention if:

- you continue to vomit and/or are unable to keep fluids down
- you become drowsy or confused
- you or your carers feel unable to manage your diabetes
- your blood glucose levels do not improve despite increased insulin doses (if you usually take insulin)

You may need to seek medical advice to treat the cause of your illness.

This leaflet is not a comprehensive and detailed guide; if you have any questions or require further explanation please do not hesitate to ask a member of your diabetes team

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact the Diabetes and Endocrinology Department at York Hospital (Telephone 01904 726510) or Scarborough Hospital (Telephone 01723 342274).

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.

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