

**Afternoon Appointment
Insulin recommendations**

Day before Procedure

If you take long acting insulin such as:
Lantus, Levemir, Humulin I, Insuman Basal, Abasaglar, Toujeo, Tresiba
Reduce your dose of insulin by 20% the day before your procedure

Day of Procedure

Type of Insulin	What to do
<p style="text-align: center;">Once daily (long acting insulin) evening injection</p> <p>Lantus Levemir Humulin I Insuman Basal Abasaglar Toujeo Tresiba</p>	<p>No dose adjustment necessary</p> <p>You will be able to have usual evening insulin after the procedure</p>
<p style="text-align: center;">Once daily (long acting insulin) morning injection</p> <p>Lantus Levemir Humulin I Insuman Basal Abasaglar Toujeo Tresiba</p>	<p>Reduce morning dose by 20%</p>
<p style="text-align: center;">Twice daily insulin</p> <p>Humulin M3 Novomix 30 Humalog Mix 25 Humalog Mix 50 Levemir or Lantus given twice a day</p>	<p>Half your usual morning dose.</p> <p>You can take usual evening dose after the procedure as normal</p>
<p style="text-align: center;">Multiple daily injection regime</p> <p>This includes an injection of short acting insulin with meals and once or twice daily background insulin</p>	<p>Take usual morning dose of short acting insulin if eating breakfast.</p> <p>Omit lunchtime dose</p> <p>Reduce morning long acting insulin dose if taken in morning by 20%</p>

**Diabetes Medication Guidelines for
people with diabetes requiring
Upper GI Endoscopy**



York Teaching Hospital
NHS Foundation Trust

**Afternoon appointment
Non – insulin medication
recommendations**

Day before the procedure

Take all medication as normal the day before

Day of the procedure

Medication	What to do
Metformin	Take as normal in morning Omit lunchtime dose if taken Take evening dose as usual
Sulfonylureas (e.g. gliclazide, glipizide, glimepiride)	Omit all doses taken on day of procedure
Meglitinides (e.g. repaglinide or nateglinide)	Give morning dose if eating breakfast
Pioglitazone	Take as normal
DPP4 inhibitors (e.g. sitagliptin, linagliptin, alogliptin, saxagliptin)	Take as normal
SGLT2 inhibitors (e.g. dapagliflozin, canagliflozin, empagliflozin)	Omit dose
GLP1 injections (e.g. exenatide, liraglutide lixisenatide, dulaglutide)	Take as normal

Remember to test blood glucose more regularly if you usually test, and that your glucose level may be a little erratic for a few days after the procedure.

Keep hypo treatment with you in case of low blood glucose levels (glucose level under 4 mmol/L)

For further advice contact the Diabetes Team:
York (01904) 726510
Scarborough (01723) 342274

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 Tara Kadis, Diabetes and Endocrine Unit, The York Hospital, telephone 01904 726510 or email tara.kadis@york.nhs.uk.

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Telephone: 01904 725566
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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.

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