

Diabetes Medication guidelines for people with diabetes  
requiring CT Colonography

## Morning Appointment

Information for patients, relatives and carers

① For more information, please contact: Diabetes and Endocrine Unit

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<b>Contents</b>	<b>Page</b>
General advice .....	2
What to do with your medications.....	2
Monitoring your blood glucose levels .....	2
What is a hypo? .....	3
What to do if you have a hypo .....	3
What to do after your procedure .....	3
What type of insulin do I take? .....	4
Insulin recommendations for morning appointment.....	5
Day before the procedure .....	5
Day of the procedure.....	5
Non – insulin medication recommendation for morning appointment .....	6
Day before the procedure .....	6
Day of the procedure.....	7

## General advice

For a successful examination to be carried out, it is very important that the bowel is completely clean and you follow the guidance below. If the bowel is not completely clean and / or the guidance is not followed correctly the examination may have to be repeated.

Some investigations require you to fast for extended periods of time to ensure the bowel is completely clean.

For people with diabetes, any procedure that causes you to miss a meal or change your usual meal plan will require special planning to safely manage your blood glucose and your medications may need some adjustment.

If you normally take insulin for your diabetes you may need to replace solid food with sugary drinks, to prevent your blood glucose level dropping too low. Examples for meal replacement could include:

- 300 millimetres (mls) of full sugar fizzy drink
- 300 - 400ml of clear apple juice

## What to do with your medications

For people who take insulin injections your usual doses may need some adjustment on the day of your bowel preparation and the day of the procedure. The charts on pages 4-5 will help you manage your diabetes treatment if taking insulin when undergoing your bowel preparation or fasting period. For people with Type 2 diabetes on tablets or injectable treatment see guidance on pages 6-7.

## Monitoring your blood glucose levels

It is advisable to test your blood glucose regularly **if you normally test**. You may need to test more often than normal. We would advise testing before each meal, before bed, and if you feel at any time that your blood glucose level is getting low. If you do not normally test your blood glucose levels then you do not need to test during this period.

When coming to the hospital please bring your medication and any equipment you need, as well as a light meal (for example a sandwich). Once you have recovered from the procedure, you will be able to eat, drink and resume your normal diabetes medications.

## What is a hypo?

A hypo or low blood glucose level is where your blood glucose level falls below the normal range – usually less than 4mmol/L. This is often associated with symptoms such as feeling sweaty, shaky, dizzy and heart racing.

You may be at risk of a hypo if you take insulin or tablets such as gliclazide, glipizide or glimepiride (Metformin on its own does not cause hypos).

## What to do if you have a hypo

You need to treat your hypo immediately by taking rapid acting carbohydrate for example:

- 150mls – full sugar fizzy drink
- Five to seven Dextrose tablets
- Four to five Glucotabs
- 60mls bottle Lift (fast acting glucose shot)
- 200mls clear apple juice

Recheck your blood glucose level 10 - 15 minutes later and repeat with more rapid acting carbohydrate if your result is still less than 4mmol/L.

Once your blood glucose level has risen above 4mmol/L recheck hourly to ensure your blood glucose does not drop too low again.

## What to do after your procedure

The nursing staff will inform you when it is safe to eat and drink after your procedure. You can resume your normal diabetes medications once you have recovered from the procedure and are eating and drinking as normal.

When you get home your blood glucose levels may vary for a short time, but this should settle quickly.

If, however, you take the diabetes medication - Dapagliflozin, Canagliflozin or Empagliflozin and become unwell following discharge home and are vomiting, **stop** these medications and consult your GP or diabetes care provider for advice.

## What type of insulin do I take?

To help you work out what to do with your insulin, you need to know what type of insulin you take. Here is a list to help you.

<b>Fast acting insulin</b>	Humulin S Actrapid Novorapid Humalog Apidra Fiasp Lyumjev
<b>Mixed insulin</b>	Humulin M3 Humalog Mix 25 Humalog Mix 50 Novomix 30
<b>Long acting insulin</b>	Humulin I Insulatard Lantus Abasaglar Levemir Toujeo Tresiba100 Tresiba 200

## Insulin recommendations for morning appointment

### Day before the procedure

Follow dietary and bowel preparation as instructed.

Test your blood glucose **at least four times a day.**

<b>Fast acting or mixed insulin</b>	Take half usual dose
<b>Long acting insulin</b>	Take as normal if you have Type 1 diabetes. Reduce the dose/s by 20% (one fifth) if you have Type 2 diabetes.

## Insulin recommendations for morning appointment

### Day of the procedure

Continue bowel preparation as instructed.

Test your blood glucose **every two hours.**

<b>Fast acting insulin</b>	Omit at breakfast
<b>Mixed insulin</b>	Take half breakfast dose and omit at lunchtime if taken at this time.
<b>Long acting insulin</b>	Take as normal if you have Type 1 Diabetes Reduce the morning dose, if taken at this time, by 20% (one fifth) if you have Type 2 diabetes.

# Non – insulin medication recommendation for morning appointment

## Day before the procedure:

<p><b>Take these medications as normal</b></p>	<p>Metformin            Pioglitazone            Byetta (exenatide)            Trulicity(dulaglutide)            Victosa (liraglutide)            Lyxumia (lixisenatide)            Ozempic(semaglutide)            Rybelsus (semaglutide) Linagliptin            Saxagliptin            Sitagliptin            Alogliptin</p>
<p><b>Omit all doses</b></p>	<p>Gliclazide            Glipizide            Glimepiride            Dapagliflozin            Empagliflozin            Canagliflozin            Acarbose            Repaglinide            Nateglinide</p>

### Day of the procedure:

Take these medications as normal	Omit the morning dose and resume when eating and drinking normally, usually later that day	Do not take any doses on the day of procedure
<p style="text-align: center;">                     Pioglitazone                      Byetta (exenatide)                      Trulicity(dulaglutide)                      Victosa (liraglutide)                      Lyxumia (lixisenatide)                      Ozempic(semaglutide)                      Rybelsus(semaglutide)                      Linagliptin                      Saxagliptin                      Sitagliptin                      Alogliptin                 </p>	<p style="text-align: center;">                     Gliclazide                      Glipizide                      Glimepiride                      Dapagliflozin                      Empagliflozin                      Canagliflozin                      Acarbose                      Repaglinide                      Nateglinide                 </p>	<p style="text-align: center;">                     Metformin                      You will be advised when to restart this                 </p>

## **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, York Hospital, telephone 01904 725789 or email [tara.kadis@nhs.net](mailto:tara.kadis@nhs.net)

## **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 [yhs-tr.patientexperienceteam@nhs.net](mailto:yhs-tr.patientexperienceteam@nhs.net)

An answer phone is available out of hours.

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