



Patient Information

For Endoscopy Patients with Diabetes

This booklet is designed to help you understand and manage your diabetes before and after your endoscopic procedure.

Adjusting your diabetic treatment

When you are undergoing an endoscopic procedure, you may need to adjust your diabetes treatment. This could upset your blood glucose levels, but please do not worry about this they should return to normal within 24 to 48 hours after the procedure.

If you normally check your blood glucose with a meter, please continue to do so. You may need to do this more often as you are preparing for the procedure especially if you feel your blood glucose levels are falling (hypoglycaemia or hypo).

Signs and symptoms of hypoglycaemia include:

• Sweating	• Drowsiness
• Shaking	• Light headedness
• Blurred Vision	• Slurred speech
• Extreme Hunger	• Muddled thinking
• Weakness	

Some people do not get symptoms, or get them at readings much higher than 4mmol/l. This is called 'Impaired hypo awareness'. Please let staff know if you do not feel your hypos.

If your glucose level is below 4mmol/l (This must be confirmed on a glucose meter) you need to take fast acting glucose (Dextro sweets). If you are fasting, it is recommended that you use a clear glucose juice (Lift juice).

Check your blood glucose again in 10-15 minutes and if still below 4mmol/L repeat your treatment if needed. Check again until your blood glucose is above 4mmol/L.

Please let the staff know that you have done this when you arrive at the hospital.

Please remember to bring with you to hospital:

- Diabetes medication (e.g., tablets, insulin) that you usually take for your diabetes.
- A supply of insulin needles (if you take insulin or other injectable treatment)

1. Procedures requiring bowel prep

(Colonoscopy/Flexible Sigmoidoscopy/Capsule Endoscopy)

It is important you keep clear sugary drinks such as lemonade, clear Lucozade available while taking bowel preparation to help maintain blood glucose levels.

- If your diabetes is **managed by diet** alone No changes required.
- If you use **tablets and/or non-insulin injectable medications** (such as: Liraglutide, Exenatide, Dulaglutide, Pramlintide, Semaglutide or Tirzepatide);
 - The day before - OMIT all ORAL diabetic medication and/or STOP all NON-INSULIN injectables once you are nil by mouth (i.e. when you stop drinking 6 hours before your appointment).

- **If you are on insulin**, please adjust your medication as per table below.

On the day of your procedure, from 6 am onwards, you should monitor your blood glucose every 2 hours prior to your arrival at hospital and bring your record with you. If you are driving, you should also check your blood glucose just prior to starting your car and drive only if your blood glucose is more than 5 mmol/L.

Insulin and frequency	Day Before Procedure	Day of Procedure
Once daily (evening) (e.g. Lantus, Levemir, Tresiba, Abasaglar Insulatard or Humulin I, Toujeo)	Take 80% of usual insulin dose at usual time	Take 80% of usual dose in the evening after the procedure.
Once daily (morning) (e.g. Lantus, Levemir, Tresiba, Abasaglar Insulatard or Humulin I, Toujeo)	Take 80% of usual insulin dose at usual time	Take 80% of your normal dose on the morning of your procedure?
Twice daily (Humulin I, Lantus, Levemir, Insulatard)	Take 80% in the morning and in the Evening	Take 80% of your normal dose on the morning of your procedure.
Twice daily Premixed Insulin (e.g. Novomix 30, Humulin M3, Humalog Mix 25 or 50)	Take half of usual insulin doses	Omit morning dose. Take 80% of your normal dose in the evening after the procedure
3 to 5 injections daily (e.g. NovoRapid, Humalog, Actrapid, Humulin S, Apidra, Fiasp with long-acting insulin)	Take half usual breakfast and evening meal insulin doses	Omit Rapid acting Insulin. Resume once E& D established

2. Procedures not requiring bowel preparation (Gastroscopy, ERCP, EUS and Bronchoscopy)

- If your diabetes is **managed by diet alone** No changes required.
- If you use **tablets and/or non-insulin injectable** medications (such as: Liraglutide, Exenatide, Dulaglutide, Pramlintide, Semaglutide or Tirzepatide);
 - The day before - medication as usual on the day
 - On the day of your procedure - OMIT all ORAL diabetic medication and/or STOP all NON-INSULIN injectables.
- **If you are on insulin**, please adjust your medication as per table below.

On the day of your procedure, from 6 am onwards, you should monitor your blood glucose every 2 hours prior to your arrival at hospital and bring your record with you. If you are driving, you should also check your blood glucose just prior to starting your car and drive only if your blood glucose is more than 5 mmol/L.

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3. Instruction for patients managed by personal insulin pump (all procedures)

- Please inform your specialist pump team before admission.
- The day before: No change once NBM reduce Basal rate by 20%. or use Temporary basal or exercise mode
- Remember to take with you all the necessary equipment for your insulin pump as this will not be available on a hospital ward.
- Do not remove the pump/Pod until either insulin and intravenous fluids, or insulin administered by pen or syringe is established.
- On the day: Continue with usual basal rates (or temporary 'reduced' rate if you have been trained to set this for fasting states) and continue to bolus as you normally do once you resume oral intake.
- Please inform staff if you are on an insulin pump as some procedures can interfere with the function of the pump. Contact the diabetes team for MKUH on 01908 995967 or TDSNT@mkuh.nhs.uk for a care plan to follow during your admission.

4. Patient Instructions post procedure

After your procedure, you will be offered biscuits and drink when you feel able to eat. We advise that you bring a snack to have when advised by the nursing team that you are able to eat and drink. Once you are eating and drinking normally, you should resume taking your normal diabetes medication from that meal onwards.

If you become unwell, especially if you are vomiting and unable to eat or take medication. Contact your usual diabetes team/GP surgery or 111. Please ensure you let them know you just had a procedure.

Advice given to patients with diabetes discharged following colonoscopy.

Take your diabetes medications as normal unless advised otherwise.

Monitor your blood glucose if you have the means to do so, up to 4 times a day, if possible, for 24-48 hours. Test more often if you are feeling unwell or sick.

Your blood glucose level may be higher than usual for a few days. This is not a concern if you are feeling well.

If you are feeling unwell (particularly if you are sick and cannot take food or medication) seek medical advice urgently.

What should I do if I am unwell?

- NEVER stop taking your insulin or diabetes tablets – illness usually increases your body's need for insulin.
- TEST your blood glucose every 2 hours, day and night.
- TEST your urine for ketones every time you go to the toilet or your blood ketones every 2 hours if you have the means to do this.
- DRINK at least 2.5 litres per day of water/sugar-free liquid during illness
- REST and avoid strenuous exercise as this may increase your blood glucose level during illness.
- EAT as normally as you can. If you cannot eat or if you have a smaller appetite than normal, replace solid food during illness with one of the following:
 - 400ml milk
 - 200ml carton fruit juice
 - 150-200mls non-diet fizzy drink
 - 1 scoop ice cream

When should I seek medical advice?

- CONTINUOUS diarrhoea and vomiting (also stop Metformin tablets), and/or high fever.
- UNABLE to keep food down for 4 hours or more.
- HIGH blood glucose levels with symptoms of illness (if above 15mmol/L – you may need more insulin)
- KETONES at ++2 or more in your urine or 1.5mmol/L or more blood ketones – you may need more insulin.

We ask for information about you so that you can receive proper care and treatment. This information remains confidential and is stored securely by the Trust in accordance with the provisions of the Data Protection Act 2018/GDPR. Further guidance can be found within our privacy notice found on our Trust website: www.mkuh.nhs.uk

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