

# Advice for people with diabetes receiving bowel preparation for colonoscopy

#### Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language, please contact the PALS desk on 01271 314090 or at ndht.pals@nhs.net.

During the time you are not eating solid food prior to your colonoscopy, please aim to replace your usual carbohydrate intake with drinks from the list of permitted clear fluids below:

To be taken freely

- All types of water
- Tea and coffee (little or no milk) including fruit and herbal teas
- Diet fizzy drinks
- Sugar free cordial
- Sugar free jelly (not red coloured)
- Oxo, Marmite, Bovril
- Consommé / clear soup

To be taken in moderation if blood glucose is 5 mmol/L or less

- Jelly containing sugar (not red coloured)
- Clear fruit juice such as apple, cranberry, pomegranate, red and white grape juice.
   Not orange juice
- Hot honey and lemon

#### Treatment by diet alone

If you control your diabetes with diet alone, you simply need to follow the instructions given to you to prepare for your colonoscopy.

### Treatment by tablets and /or insulin

The endoscopy booking clerk will offer you the first available appointment for your colonoscopy so that you do not have to go too long without eating and drinking.

A pre-assessment nurse will ask you about your diabetes control and may refer you to the diabetes nurse specialist or consultant gastroenterologist for specific instruction.

# Adjusting your diabetes medication to prevent hypoglycaemia ('hypo')

You will need to adjust your treatment the day before and the morning of the procedure to reduce the risk of hypoglycaemia (low blood sugar levels). As a result, your blood sugar levels may be a little higher than usual. This is only temporary in order to maintain your blood sugar levels stable throughout the procedure and you should be back to your usual level of control within 24 to 48 hours.

If you need to make any changes to your diabetes medication or insulin, we strongly advice that you call the **Diabetes Nurse Team at North Devon District Hospital** for advice, well in advance of your appointment.

Tel: 01271 322726

Monday to Friday, 8am to 5pm.

Please leave a message if needed.

#### How to treat hypoglycaemia

Make sure you have hypo treatment at home, for example:

- 5-6 glucose tablets (if sucked, glucose tablets will be quickly absorbed through the tissues in the mouth and will not interfere with the procedure), or
- 4 large Jelly Babies or 7 large Jelly Beans, or
- Another source of sugar, e.g. 150ml of non-diet fizzy drink or 200ml of clear apple juice

Test your blood sugar again after 10-15 minutes. If it is still below 4.0 mmol/L, repeat the treatment. Hypo treatment can be repeated up to 3 times if your blood sugar stays below 4.0mmol/L.

If you STILL feel you need something further, have a starchy carbohydrate snack, for example:

- a slice of bread or toast
- a couple of plain biscuits e.g. rich tea, plain digestive
- a piece of fruit such as apple or banana

If you have a starchy carbohydrate snack to treat your low blood sugar (during the time of eating no solid food), please contact the **Endoscopy Department** on **01271 349180** as your appointment may need to be rearranged.

#### On the morning of your colonoscopy

If you have a hypo during the 2 hour time when you are not allowed to eat to drink, please treat with 5 - 6 dextrose tablets or 1 - 2 tubes of 'glucogel' or 'glucoboost' if you have this.

When you travel to and from the hospital for your colonoscopy, carry a hypo treatment such as apple juice.

If you have any symptoms of a low blood sugar such as sweating, dizziness, blurred vision or shaking, please test your blood sugar levels. If it is less than 4.0mmol/L, have 200ml of a clear non-fizzy drink such as clear apple juice. Please then tell the staff at the hospital that you have done this because it is possible that the time of your colonoscopy may need to be re arranged.

Please inform the nursing staff immediately if you feel 'hypo' at any time during the visit.

#### **Blood sugar monitoring**

If you test your blood sugar levels, check it as usual, including on the morning of your colonoscopy procedure and carry your equipment with you to the appointment.

If you do not usually test your blood, do not worry as it will be checked on your arrival to the endoscopy department.

#### After your colonoscopy

We advise that you bring your own food of choice to have after your procedure.

## How to adjust your insulin in preparation for your colonoscopy

# People who take tablets to control their diabetes (or take the once weekly subcutaneous injection)

Please follow the chart below.

Tablets	Day prior to procedure	Morning of procedure	Restarting after the procedure
Acarbose	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take tablets after procedure or when they are next due (once eating and drinking normally)
Meglitinide (e.g. Repaglinide, Nateglinide)	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)

Tablets	Day prior to procedure	Morning of procedure	Restarting after the procedure
Metformin	If having breakfast take normal morning dose only. Omit the rest of the day while not eating.	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)
Metformin (Modified/sustain ed release) (e.g. Sukkarto SR, Glucophage SR)	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)
Sulphonylurea (e.g. Gliclazide, Glipizide, Glimepiride, Glibenclamide)	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)
Pioglitazone	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)
DPP IV inhibitor (e.g. Sitagliptin, Vildagliptin, Saxagliptin, Alogliptin, Linagliptin)	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)
GLP 1 analogue *(weekly SC injection)* (e.g. Exenatide, Liraglutide, Lixisenatide, *Dulaglutide* *Bydureon*)	If due today omit dose	If due today omit the dose	If omitted pre-procedure can take after procedure (once eating and drinking normally)
SGLT-2 Inhibitors (e.g. Dapagliflozin, Canagliflozin, Empagliflozin)	Omit dose	Omit morning dose	Bring tablets to Endoscopy. Take after procedure or when they are next due (once eating and drinking normally)

### People who take insulin to control their diabetes

Please follow the chart below for general guidelines. However, we strongly advice that you call the Diabetes Nurse Team on 01271 322726 at North Devon Hospital for advice.

Insulins	Day prior to procedure	Morning of procedure	Restarting after the procedure
Once daily (morning) (e.g. Lantus, Levemir, Abasaglar, Insulatard, Humulin I, Insuman Basal, Toujeo)	Reduce the dose by 20%	Reduce dose by 20%	Day after the procedure resume usual dose (once eating and drinking normally)
Once daily (evening) (e.g. Lantus, Levemir Tresiba, Insulatard, Humulin I, Insuman Basal)	Reduce dose by 20%	N/A	Resume normal dose (once eating and drinking normally)
Twice daily (mixed short & long acting insulin) (e.g. Novomix 30, Humulin M3, Humalog Mix 25, Humalog Mix 50, Insuman comb 25, Insuman comb 50) Or Twice daily intermediate or long acting insulin (e.g. Levemir, Humulin I, Insulatard)	Half both the morning and evening dose	Half the usual morning dose	Resume normal dose (once eating and drinking normally)
Twice daily – Separate injections of short acting (e.g. Animal Neutral, Novorapid, Humalog, Humulin S, Apidra) and intermediate acting	Regime complex. Must be tailored by diabetic nurse.  *Must refer to diabetic nurse*	Regime complex. Must be tailored by diabetic nurse.  *Must refer to diabetic nurse*	Regime complex. Must be tailored by diabetic nurse.  *Must refer to diabetic nurse*
(e.g. Animal Isophane, Insulatard, Humulin I, Insuman)			

Insulins	Day prior to procedure	Morning of procedure	Restarting after the procedure
3, 4 or 5 injections daily e.g. 3 meal time injections of short	No change to basal (background) insulin.	No change to basal (background) insulin.	No change to basal (background) insulin.
acting insulin (e.g. Novorapid, Humalog, Aprida, Actrapid, Humulin S) PLUS Once daily or twice	Omit all meal time (short acting) insulin while not eating.	Omit all meal time (short acting) insulin while not eating.	Resume short acting insulin once eating and drinking normally.
daily background (basal) insulin (e.g. Abasaglar, Lantus, Levemir)	*Must refer to diabetic nurse*	*Must refer to diabetic nurse*	*Must refer to diabetic nurse*

## **Further information**

For further information, please contact the nursing staff at the Endoscopy Department on **01271 349180**.

#### **PALS**

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email ndht.pals@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

#### Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

'Care Opinion' comments forms are on all wards or online at www.careopinion.org.uk.

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