

Advice for people with diabetes undergoing colonoscopy or sigmoidoscopy with bowel prep Eastern & Northern Devon

Please read your leaflets about your procedure and bowel prep carefully

- Please make sure you know when your fasting period will be. Depending on the procedure you are having and the bowel prep used, you may need to miss between 1 and 5 meals. You may also need to avoid high-fibre foods for a few days before the procedure.
- If you are on insulin, the endoscopy team will try to avoid a long fasting period before your procedure, but you may still need to miss up to 3 meals.
- Your procedure leaflet explains what kinds of foods and fluids you can have prior to the procedure.

Remember to bring with you to hospital

- A sugary drink.
 - The blood glucose testing equipment you usually use.
 - Any insulin and tablets that you usually take for your diabetes.
 - Instructions for taking insulin before your operation (assessing nurse to complete).
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Diet-controlled type 2 diabetes

No additional steps are needed. Please simply follow the advice in your leaflet about the procedure and the bowel prep.

Medications for type 2 diabetes other than insulin

SGLT-2 inhibitor medications such as canagliflozin, dapagliflozin, empagliflozin, ertugliflozin	Stop taking two days before fasting commences. Restart when eating normally after the procedure.
Metformin	Take as normal.
Sulfonylurea medications such as gliclazide, glipizide or glimepiride	Take as normal before fasting. Omit completely on the day fasting starts. Restart when eating normally after the procedure.
Injected GLP-1 agonist medications such as Ozempic, Trulicity, Victoza, Mounjaro, Saxenda, Wegovy	Take as normal.
Tablet GLP-1 agonist medications such as Rybelsus	Take as normal.
DPP-4 inhibitor medications such as alogliptin, sitagliptin, linagliptin, saxagliptin, vildagliptin	Take as normal.
Pioglitazone	Take as normal.

Insulin

Please see the following table for guidance on insulin dosing before your procedure. Please note that the table offers only general guidance.

If you have frequent hypos or other queries, we recommend discussing in advance with your diabetes team or the diabetes nurse specialist team at your local hospital (Barnstaple or Exeter).

If you take other medications for diabetes as well as insulin, please follow the advice in the previous section for your non-insulin medications.

Insulin	On any fasting days before your procedure	Day of your procedure
Once daily long-acting insulin e.g. Abasaglar, Humulin I, Insulatard, Lantus, Levemir, Tresiba, Toujeo	Reduce dose by 20%.	If you take insulin in the morning, reduce dose by 20%. Resume normal insulin doses after the procedure.
Twice daily long-acting insulin e.g. Humulin I, Insulatard, Levemir	Reduce each dose by a third.	Reduce morning dose by a third. Resume normal insulin doses after the procedure.
Twice daily mixed insulin e.g. Humulin M3, Humalog Mix25, Humalog Mix50, Hypurin Porcine 30/70 Mix, NovoMix 30	Reduce each dose by half.	Reduce morning dose by half. Resume normal insulin doses after the procedure. Or, if only eating a half/small meal, reduce the evening dose by half.
Basal-bolus with long-acting insulin... e.g. Levemir, Lantus, Abasaglar, Tresiba, Toujeo, Insulatard, Humulin I ...and short-acting insulin with meals e.g. NovoRapid, Apidra, Fiasp, Humalog, Humulin S, Trurapi, Admelog	Take long-acting insulin as normal. Omit short-acting insulin for any missed meals.	Take long-acting insulin as normal. Omit short-acting insulin for any missed meals. Resume normal insulin doses after the procedure.
Insulin pump	Continue basal insulin as normal. Omit boluses for any missed meals.	Continue basal insulin as normal. Omit boluses for any missed meals. Resume normal insulin after procedure.
Insulin pump with closed loop	Keep the pump in automated (closed loop) mode. Omit boluses for any missed meals.	Keep the pump in automated (closed loop) mode. Omit boluses for any missed meals.

Avoiding hypoglycaemia before your procedure

There is usually only a risk of having hypos if you are on insulin.

Do not hesitate to treat a hypo, but if possible avoid solid snacks (e.g. chocolate, sweets, jelly babies). It is more likely that the procedure will be able to go ahead as scheduled if liquid hypo treatment is used.

When you travel to and from the hospital for your procedure, please have a clear non-fizzy drink (e.g. pure fruit juice) with you.

If you have any symptoms of a low blood sugar, such as sweating, dizziness, blurred vision or shaking, please check your blood glucose. If it is less than 4 mmol/L take 150-200 ml of your sugary drink – this is about the same amount as half a standard sized can of soda.

Please tell staff at the hospital if you have needed to treat a hypo. For safety reasons, it is possible that the time of your procedure may need to be rearranged.

After your procedure

After your procedure, you will be offered food and drink when you feel able to eat. If you are eating and drinking normally you should resume taking your normal tablets and/or insulin at the usual time. Your blood glucose levels may be higher than usual for a day or so.

When you get home, if you are having problems with your blood glucose levels, please call the diabetes specialist nurse team at your local hospital – see contact details below.

If your appetite is less than usual after your procedure, there may be an increased risk of hypos (low blood glucose levels). If you are on insulin and your glucose levels are lower than usual, consider reducing your insulin doses by 20%.

If your glucose levels are lower than usual and you take a medication such as gliclazide, glipizide or glimepiride, consider omitting these tablets until your appetite recovers.

If you have type 1 diabetes and are vomiting or unable to eat, emergency advice is needed. If this occurs outside of normal working hours for the diabetes specialist team, please contact NHS 111.

How to contact the hospital diabetes nurse specialist team

- Exeter – phone 01392 411611 and ask for the diabetes nurse specialist on call. For pre-procedure advice, please call Mon-Fri 9 am – 4 pm. If emergency advice is needed after your procedure, you can also call at 9 am – 1 pm at weekends.
- Barnstaple – phone 01271 322726.

This information can be offered in other formats on request, including a language other than English and Braille.

RD&E (Eastern Services) main switchboard: 01392 411611

NDDH (Northern Services) main switchboard: 01271 322577

For Royal Devon services log on to: <https://royaldevon.nhs.uk>

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