

## Pre-operative diabetes (non-insulin treatments)

**Advice leaflet for people with diabetes controlled with tablets or by injections of GLP-1 agonists - Byetta (Exenatide), Victoza (Liraglutide) or Lyxumia (Lixisenatide) undergoing day surgery or a procedure requiring a period of starvation.**

### Before your operation or procedure

**Please follow the instruction in the table on the following page marked "What to do with your medication before surgery".**

#### If your operation is in the morning

- Do not eat any food after midnight
- You may drink clear (and not fizzy/ carbonated) fluids (such as black tea or coffee, pure smooth fruit juice or water) up to 2 hours before the operation

#### If your operation is in the afternoon

- Eat breakfast before 7 am and take no food after this time
- You may drink clear (and not fizzy/ carbonated) fluids (such as black tea or coffee, pure smooth fruit juice or water) up to 2 hours before the operation

When you travel to and from the hospital for your operation carry a sugary drink.

If you have any symptoms of a low blood sugar, such as sweating, dizziness, blurred vision or shaking please test your blood sugar if you are able. If it is less than 4 mmol/L or you are unable to test, take 150mls of a clear non-fizzy sugary

drink (such as pure smooth fruit juice - this is the same amount as half a standard sized can of soda). Please tell staff at the surgical unit that you have done this because it is possible that the time of the operation may need to be changed.

After your operation you will be offered food and drink when you feel able to eat. When you are eating and drinking normally you should resume taking your normal tablets. However, your blood glucose levels may be higher than usual for a day or so. With some operations an insulin infusion into a vein may be needed to keep blood glucose controlled until you are able to eat and drink and restart your normal medication.

### Remember to bring with you to hospital

- A sugary drink
- Blood glucose testing equipment (if you usually monitor your blood glucose)
- The tablets and injections you usually take for your diabetes

### Instructions for taking your diabetes tablets before your operation (assessing nurse to complete)

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# What to do with your medication before the surgery

Tablets	Day prior to admission	Day of Surgery	
		Patient for AM surgery	Patient for PM surgery
<b>Acarbose</b>	Take as normal	Omit morning dose if NBM	Take morning dose if eating
<b>Metaglinide</b> (repaglinide or nateglinide)	Take as normal	Omit morning dose if NBM	Take morning dose if eating, omit lunchtime dose
<b>Metformin</b> (procedure not requiring contrast media)	Take as normal	If taken once or twice a day – take as normal If taken three times per day, omit lunchtime dose	If taken once or twice a day – take as normal If taken three times per day, omit lunchtime dose
<b>Sulphonylurea</b> (e.g. Glibenclamide, Gliclazide, Glipizide, etc.)	Take as normal	If taken once daily in the morning – omit the dose that day If taken twice daily – omit the morning dose that day	If taken once daily in the morning – omit the dose that day If taken twice daily – omit both doses that day
<b>Pioglitazone</b>	Take as normal	Take as normal	Take as normal
<b>DPP IV inhibitor</b> (e.g. Sitagliptin, Vildagliptin, Saxagliptin)	Take as normal	Take as normal	Take as normal

Tablets	Day prior to admission	Day of Surgery	
		Patient for AM surgery	Patient for PM surgery
<b>SGLT-2 Inhibitors</b> (Dapagliflozin, canagliflozin, empagliflozin)	Take as normal	Omit on day of surgery	Omit on day of surgery
<b>GLP-1 analogue</b> (e.g. Exenatide, Liraglutide, Lixisenatide)	Take as normal	Take as normal	Take as normal

**You should resume taking your normal tablets the morning after surgery. However, your blood glucose may be higher than usual for a day or so.**

**If you are taking Dapagliflozin, canagliflozin, or empagliflozin these medications should be omitted on the day of surgery and restarted once normal eating and drinking has been re-established.**

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by Royal Devon staff undertaking procedures at the Royal Devon hospitals.

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