

Section nine

Diabetes





15 Healthcare Essentials

Diabetes

15 HEALTHCARE ESSENTIALS

DiABETES UK
CARE. CONNECT. CAMPAIGN.

The minimum level of healthcare everyone with diabetes should receive

1 Your **blood glucose levels measured** (HbA1c blood test) every year and if you need to self-monitor, access to test strips and equipment.

2 Your **blood pressure measured** every year.

3 Your **blood fats** (such as cholesterol and triglycerides) **measured** every year.

4 Your **eyes screened** for signs of retinopathy every year.*

5 Your **feet and legs checked** every year.

6 Your **kidney function monitored** every year.

7 **Emotional and psychological support.**

8 **Individual, ongoing dietary advice** and support to manage your weight.

9 Access to a local **diabetes education course.**

10 Support from a range of **specialist diabetes healthcare professionals.**

11 A **free flu vaccination** every year.

12 **High-quality diabetes care** if you're in hospital.

13 The chance to **talk about any sexual problems.**

14 If you smoke, **support to help you quit.**

15 Information and **specialist care if you're planning to have a baby.**

For more information on your 15 Healthcare Essentials go to:
www.diabetes.org.uk/15-essentials

For information, advice and support call our Helpline on 0345 123 2399**

Use this list to talk to your healthcare team about your individual needs as part of your annual care planning review, where you should agree your priorities, targets and a written plan of action to help you reach them.

There are different guidelines for children and young people, and you should receive care from a specialist diabetes paediatric team.

To find out more go to www.diabetes.org.uk/Type-1-essentials

* In some areas this may be every two years for those with no problems.

**Calls may be recorded for quality and training purposes. A charity registered in England and Wales (215199) and in Scotland (SC039136). © Diabetes UK 2016. 0005B.





CPR for Diabetic Feet



CPR for DIABETIC FEET

C

Check both feet, heels to toes,
any ulcers present, look between
the toes

Any breaks in skin, areas of
discolouration, swelling or hard
skin?

Check inside and outside
footwear

P

Protect feet by applying cream to
moisturise

Wear well fitting socks & shoes.

Care cutting toe nails.

Eat a healthy diet and maintain
good blood glucose levels.

Receive annual checks from
Health care professional

R

For "Foot Attack" refer all
patients via e-referral to the
Diabetic foot hospital team
and to the Podiatry service

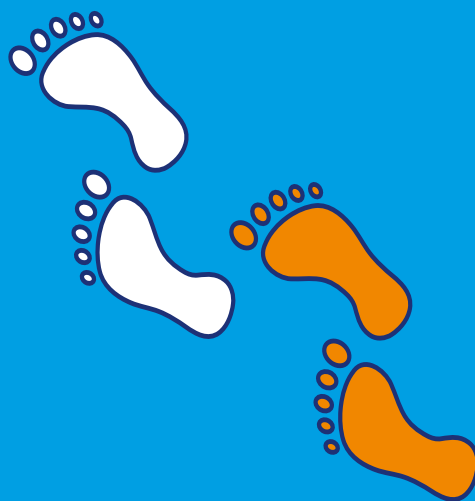
Podiatry contact details can be
found on NSCP intranet



Healthy Feet

DiABETES UK
KNOW DIABETES. FIGHT DIABETES.

Simple steps to healthy feet if you've got diabetes



Never ignore a problem with your feet

- Foot problems can develop extremely quickly. Urgent treatment is vital.
- If you have any concerns about your feet contact your diabetes healthcare team.
- Know who to call at the first sign of any new foot problems and keep their numbers handy.

For more information and advice

Go to www.diabetes.org.uk/putting-feet-first

Call **0345 123 2399***

Monday to Friday, 9am–7pm

Email helpline@diabetes.org.uk

*Calls may be recorded for quality and training purposes.
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Your feet are important especially when you've got diabetes

**Every week diabetes causes over
150 amputations in the UK.**

People with diabetes can get foot problems because there is too much blood glucose (also called sugar) in the blood over a long period of time.

This can stop your nerves working so you might not feel when you've cut your foot or burned yourself.

It can also make it difficult for your body to heal itself properly. This means even small cuts, blisters, burns or infections can lead to ulcers and amputations.

If people manage their diabetes well most foot problems, including amputations, can be prevented.

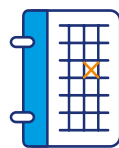
You can also dramatically reduce your chances of foot problems by taking good care of your feet.

This leaflet tells you how.



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Take these simple steps to healthy feet



Go to your foot check

If you're over 12 years old a trained professional should inspect your bare feet once a year. This will spot if you are at risk of any foot problems.

Know how your feet are doing

At the end of the foot check you should be told if you are at high risk of developing foot problems or if you need to see a specialist for expert foot advice.



Look at your feet every day

Whether it's when you're putting your socks on or just before bed check your feet every day. If you see any colour changes, swelling, pain, cuts or bruises, build-up of hard skin, or anything unusual tell your diabetes team.

If you lose feeling in your feet be extra careful

Being at high risk of foot problems or losing feeling in your feet means you might not realise when you've hurt yourself. Try not to go barefoot, especially on hot sand or gravel, and don't sit too close to radiators or heaters.



Watch out cutting your nails

If your body can't heal itself properly any kind of wound can increase the chances of a serious foot problem so cut your nails carefully. Don't cut down the side of your nails to avoid ingrowing toenails.

Don't use corn-removing plasters or blades

These can damage your skin and cause more problems for your feet. If you have corns a healthcare professional should deal with them.



Make sure your socks and shoes fit

Blisters can be dangerous for people with diabetes. If your shoes are too tight, too loose or rub you then don't wear them. Even if they look great.

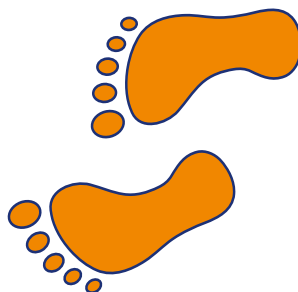
Take control of your diabetes

Easier said than done. But lowering high amounts of sugar in your blood will help prevent nerve damage and can stop things getting worse. Ask your diabetes team about the different ways they can help.



Ask for help to stop smoking

Smoking makes it harder for blood to travel around your body (like to your feet) so puts you at even greater risk of amputation. Your healthcare team can make it easier to quit.





Lucozade

LUCOZADE ENERGY IS CHANGING



Lucozade Energy Original now contains approximately 50% less glucose based carbohydrates. All flavours have significantly less glucose based carbohydrates – please check the label.

New products will appear on shelf from April 2017, for a time old and new bottles and cans may be on shelf together so remember to **check the label** for the amount of glucose based carbohydrates.

**This applies to all Lucozade Energy flavours.
People with diabetes please consult your health professional.**

NUTRITIONAL INFORMATION

Typical values	100ml	380ml
Energy, kJ / kcal	158 / 37	600 / 141
Carbohydrate, g	8.9	33.8
of which sugars, g	4.5	17.1
Salt, g	0.08	0.31

Contains negligible amounts of – Fat, Saturates and Protein.

Contains 8.9g glucose based carbohydrate per 100ml and 33.8g per 380ml bottle.

***Reference intake of an average adult (8400kJ/2000kcal)**

FOR PRODUCT INFORMATION PLEASE VISIT: WWW.LRSUNTORY.COM/HEALTH
OR CONTACT CONSUMER CARE ON 0800 096 3666



Information from Diabetes UK:

If you have been advised to drink **Lucozade Energy Original** when your blood glucose is low, the amount you drink will need to change. For example if you have been told you need:

- 10g of carbohydrate, you will now need 110ml
- 15g of carbohydrate, you will now need 170 ml

Remember to check the label before use.

For other flavours the amounts to drink will be different. Please read the label and talk to your health care professional.

Please note that Ribena (Squash and Ready to Drink) and Orangina will also be reducing in sugar during 2017.
Please check nutritional label for information.

LUCOZADE ENERGY and the Arc Device are a registered trade mark of Lucozade Ribena Suntory Ltd.



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Blood Glucose Levels

	3.9 or below	Hypoglycaemia Give 300 mls (½ tumbler) of Lucozade and refer to hypo guidance flow chart
	4	Good, continue usual insulin doses If blood glucose readings are regularly 4-5 mmol/l please check... is eating enough and having snacks between meals. If readings are 4-5 mmols/l more than twice a week, despite regular meals and snacks contact the practice nurse or doctor for advice as the insulin dose may need to be reduced.
	5	
	6	
	7	
	8	
	9	
	10	
	11	
	12	Readings are rising - what is the cause? Has... eaten extra? or is she / he developing an infection or being treated for an infection? 3 consistent readings in this range require advice Contact the doctor
	13	
	14	
	15	
	16	
	17	
	18	Contact doctor for advice as extra insulin is likely • Get... to drink more water or sugar free fluids • Test blood glucose every four hours • If... is unwell or vomiting or you are worried contact the doctor
	19	
	20	
	21	
	 High	



Management of Hypoglycaemia Guidance

Hypoglycaemia is a blood glucose below 4 mmol/l		
If unable to check blood glucose levels and symptoms of hypoglycaemia are present treat as below		
IS ABLE TO EAT/DRINK	UNABLE TO EAT/DRINK CAN SWALLOW	UNCONSCIOUS
MILD Symptoms: Hungry, headache, forgetfulness, anxiety, pallor, sweating, trembling or shakiness, lack of concentration, fast pulse or palpitations, tingling of lips, tearful, mood change - irritability, angry or aggressive behaviour, feeling warm/hot	MODERATE Symptoms: difficulty concentrating, vagueness, confusion, weakness, dizziness, difficulty swallowing, drowsiness, glazed eyes	SEVERE Symptoms: Unable to swallow, Unconscious or fitting
STEP 1		
Give approximately 300mls of Lucozade or 150mls sugary coke, fruit juice or other non-diet drink OR 4-6 glucose tablets or five sugary sweets – e.g. jelly babies	If swallow present: Give something sugary as detailed for mild hypoglycaemia If uncooperative or unable to take above: Administer ½ tube of Gluco Gel inside each cheek.	Emergency assistance required. Call 999 and place in recovery position. Inform operator of diabetic status and blood sugar reading
STEP 2		STEP 2
Re-check blood glucose after 10-15 minutes. If still below 4 mmol/l repeat STEP 1. If above 4 mmol/l go to STEP 3		Review insulin dose and reason for hypoglycaemia once recovered
STEP 3		
Give one of the following a roll/sandwich, cereal bar, portion of fruit, two biscuits, pack of dried fruit or a meal if it is due. Review insulin dose and reason for hypoglycaemia once recovered		