

# QUINT BLAST



# **DIABETES**

# **DEFINITION:**

Diabetes is a condition marked by high blood sugar (glucose) levels.

Type I diabetes is an autoimmune disease that is characterised by a complete lack of insulin and requires daily insulin injections.

Type II diabetes is the most common form of diabetes and usually affects older adults. The amount of insulin produced in type II diabetes is insufficient. Residents can often be managed with lifestyle changes and oral therapies, however may progress to becoming insulin dependent.

# **SIGNS AND SYMPTOMS:**

Symptoms may include:

- Excessive thirst
- Tiredness
- Frequent urination
- Blurred vision
- Increased frequency of UTIs

Diabetes is associated with many complications including:

- Eye damage
- Nerve damage to the feet
- Kidney problems
- An increase in cardiovascular risk
- Circulation problems in the legs.

# **INTERVENTIONS:**

- Manage other cardiovascular risk factors e.g. BP and cholesterol.
- Ensure compliance with a healthy diet.
- Ensure regular foot and eye check-ups.
- Report any worsening symptoms of thirst, increased urine output and/or sweet fruity breath (could be a sign of hyperglycaemia).
- Monitor BSLs and for signs of hypoglycaemia (e.g. drowsiness and confusion).
- Encourage lifestyle modifications including regular exercise and smoking cessation.

# **ASSESSMENT & MONITORING:**

- Conduct BSL monitoring including fasting and random to help the doctor design the most effective therapy.
- Monitor dietary intake.
- Monitor for symptoms of poor glycaemic control.

# **QUALITY USE OF MEDICINES:**

## **JUDICIOUSLY**

- ✓ Encourage lifestyle changes e.g. healthy diet, regular exercise...
- ✓ Ensure that other cardiovascular risks are being managed e.g. BP.

# **APPROPRIATELY**

✓ In the aged care setting, avoiding hypoglycaemia and falls in residents may be more important than achieving tight glucose control.

### **SAFELY**

- ✓ Monitor for side effects of therapies.
- ✓ Monitor for the complications of diabetes e.g. regular foot and eye examinations.

# **EFFECTIVELY**

- Monitor BSLs at regular intervals as directed by the doctor.
- ✓ The doctor may order regular bloods including HbA1c (a check of long-term glucose control).

# **DESIRED OUTCOMES:**

- Keep the resident free from symptoms of hypo or hyperglycaemia and minimise the risk of any associated complications.
- Ensure interventions are realistic in the context of the resident's life-pathway considerations.













