

Diabetes

Managing Sick Days

Information leaflet



Being ill can affect your diabetes control. Your blood glucose may rise and this increases the risk of Diabetic Ketoacidosis (DKA). This happens because during illness other hormones prevent insulin from working normally. DKA occurs when there is a lack of insulin, blood sugars are usually high and ketones are produced.

Typical conditions that may affect your Diabetes control are:

Common colds/flu

Chest infections

Injuries

Vomiting/Diarrhoea

Skin Infections (e.g. boils cuts)

Foot/Leg Ulcers

Remember that your blood glucose levels can rise even if you are not eating properly, or if you feel nauseated or are vomiting.

**A GOLDEN RULE; NEVER STOP TAKING YOUR INSULIN
OR YOUR DIABETES TABLETS**

(unless you have been advised to do so by your doctor).

BLOOD GLUCOSE AND KETONE MONITORING

- **Monitor blood glucose levels 2-4 hourly (minimum 4xday)**
- **ALWAYS CHECK FOR KETONES DURING ILLNESS (TYPE1 DIABETES)**
- **If eating and ketones are present in your blood or urine it is a sign that your body requires more insulin.**

KETONE TESTING

Urine Ketone
Ketostix

Blood Ketone
***(CareSens Dual /
GlucoMen Areo 2K Meter)***

0 Negative less than 0.6 mmol/l
(If unwell retest 2-4 hourly to assess)



+/- Trace 0.7 - 1.5 mmol/l
(Give extra dose of quick acting insulin, test blood glucose and ketones in 1-2 hours)



+ / ++ Moderate 1.6 – 3.0 mmol/l
(Give extra dose of quick acting insulin, continue testing blood glucose and ketones)
Seek medical advice



+++ / +++++ Large More than 3.0 mmol/l
(Give extra dose of quick acting insulin)
Seek urgent medical advice

INSULIN MANAGEMENT DURING ILLNESS

NEVER STOP TAKING YOUR INSULIN

If your blood glucose is 13.0mmol/l or above but you have no ketones:

- Take 4-10 units of your rapid acting insulin(10% of your total daily dose). This can be taken as an extra injection.
- To calculate 10% of your total daily dose of insulin add together your background and meal time doses then divide by 10. For example:

Novorapid 10,10,10 (30) + Levemir 30 = 60 divide by 10 = 6

- Continue blood glucose monitoring

If your blood glucose is 13.0mmol/l or above and you have ketones:

- Take 4 – 10 units of your rapid acting insulin (20% of your total daily dose.)
- To calculate 20% of your total daily dose divide by 5.

For example:

Novorapid 10, 10, 10 (30) + Levemir 30 =60

divide by 5 =12

This can be repeated 2 – 4 hourly if necessary, and until your ketones are negative.

HOSPITAL ADMISSION MAY BE REQUIRED IF:

- You cannot swallow or keep fluids down
- Have persistent vomiting
- Have persistent high blood sugars
- Have persistent ketones or increasing levels of ketones
- Have abdominal pain and or breathlessness

FOOD AND DRINK ADVICE

- Drink 100-200ml (non sugary fluids) e.g. water every hour or regular sips to prevent dehydration.
- Continue eating if you feel able to, even if your blood glucose is high.
- If your appetite is poor and you are unable to eat solid food replace meals with carbohydrate containing fluids.

Such as:

- Lucozade
- Pure fruit juice
- Coco cola
- Milk

FOR FURTHER ADVICE

If your blood glucose levels remain elevated and/or if your symptoms are getting worse; you are vomiting or cannot keep fluids down. Or if you are unsure what to do

Please Seek Urgent Advice

(see last page for contact numbers)

Here is a space for you to record your current insulin type and doses. You may also find it useful to work out 10% and 20% of your total daily dose of insulin, (in preparation for sick days).

Type of Insulin:

10%

20%

ITEMS TO STOCK ON SICK DAYS



Available on prescription





Useful Contact Numbers:

Diabetes Education Centre
01246 512113

Dietetics Department
01246 512173

Appointments
01246 516090

NHS Direct
085454647



Chesterfield Royal Hospital
NHS Foundation Trust



Illness leaflet

Chesterfield Royal Hospital NHS Foundation Trust

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