



Guidelines for Diabetic patients before endoscopic procedures

We will try and arrange endoscopic procedures for diabetic patients in the morning

Diabetes + Upper GI Endoscopy (Also known as Gastroscopy/OGD):

Patients on insulin: Upper GI endoscopy (OGD)

Take normal insulin on day before the endoscopy

Morning of OGD check blood glucose regularly

Delay morning insulin injection until after OGD

After OGD check blood glucose and administer insulin 20 minutes before food as normal

Insulin dose may need to be reduced if blood glucose low or meal has been missed

Patients on hypoglycaemic tablets: upper GI endoscopy (OGD)

If on gliclazide/glimepiride/metformin: omit tablet on morning of OGD

If on chlorpropamide/glibenclamide: stop tablets 24 hours before OGD

Restart tablets once eating and drinking normally

Diabetes + Lower GI endoscopy (Colonoscopy)

Patients on insulin: colonoscopy

Continue insulin as normal during period of bowel preparation

Supplement sugar level with Lucozade if blood sugar (BS) level drops (see below)

More regular monitoring of BS is necessary

Small reduction in insulin dose may be needed.

Patient on hypoglycaemic tablets

Continue tablets as normal

Supplement with Lucozade if Blood Sugar (BS) drops (for details see below)

More regular monitoring of BS is necessary

NOTE

100ml Lucozade contains 19g carbohydrate (CHO)

100ml (non diet) fizzy lemonade or Coke contains 10g carbohydrate (CHO)

100ml Lucozade Sport contains 7g carbohydrate (CHO)

So 1 glass (180-200ml) Lucozade or 2 glasses lemonade/coke can be sipped slowly at meal times to replace usual dietary carbohydrate (CHO)

Equivalent for Lucozade Sport is 3 glasses

All patients should also take plenty of other clear fluids including salty drinks/clear soup to replace salt and water lost through the bowel because of Picolax preparation.

