

Management of Diabetes in the Day Surgery Unit

October 2004

Diabetes

- Incidence of diabetes
- Types of diabetes
- Perioperative response to surgery and anaesthesia
- Effects of hyperglycaemia
- Management

Diabetes

- One in four Australian Adults has either diabetes or impaired glucose metabolism
- Australia's fastest growing chronic disease

Types of Diabetes

Type 1

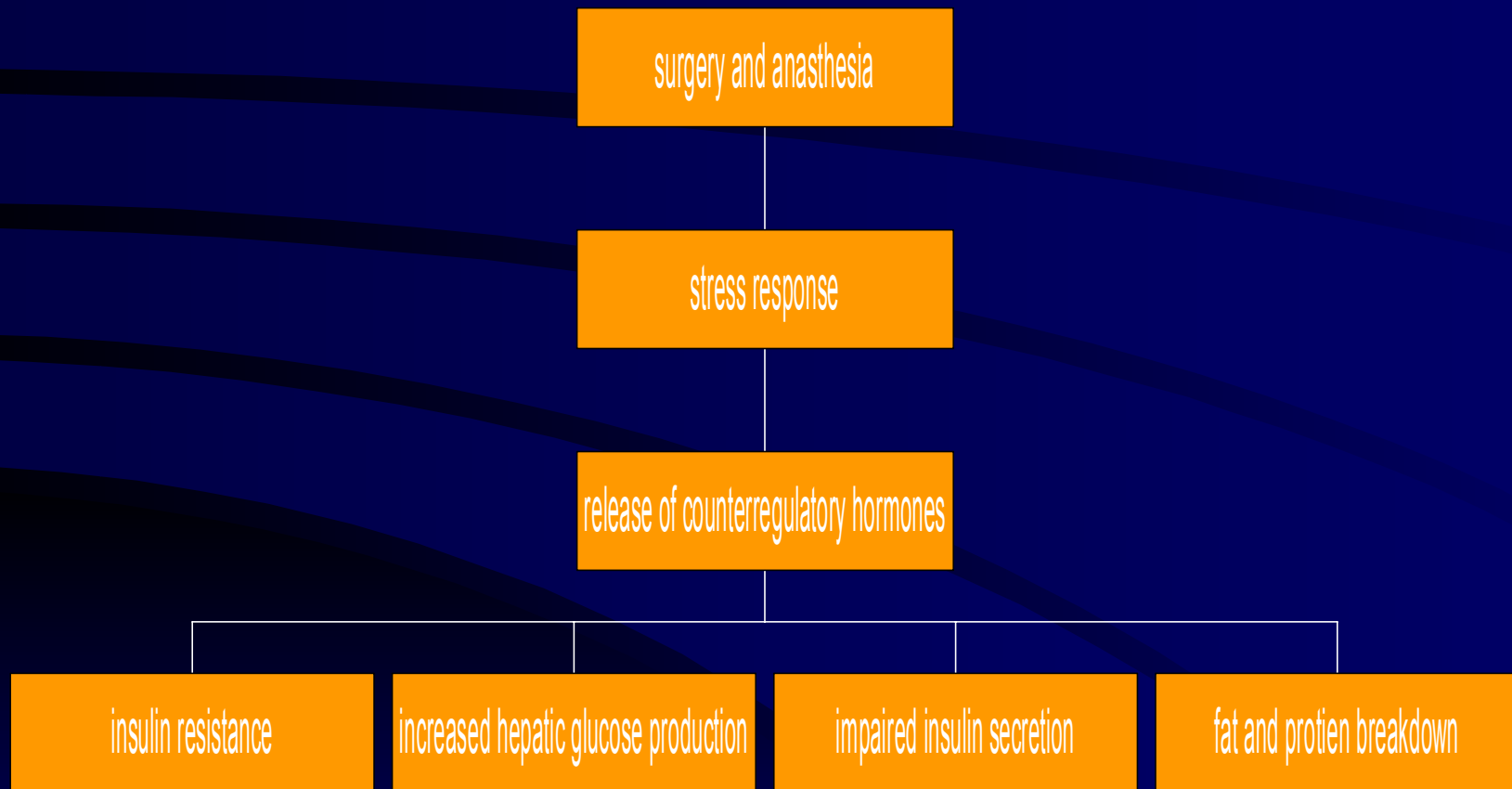
- 15% of people with diabetes
- Under 40 years at onset
- Absolute insulin insufficiency
- Autoimmune disease
- Insulin dependant

Types of Diabetes

Type 2

- 85% of people with diabetes
- Over 40 years at onset
- Relative insulin insufficiency
- Insulin resistance
- Diet, exercise, OHA's, may require insulin

Perioperative Response to Surgery and Anaesthesia



Hyperglycaemia

- Inhibits defences against infection
- Impairs wound healing

Management

Pre operative assessment

- Glycaemic control
- Neuropathy
- Renal disease
- Cardiovascular disease

Management

Type 2 diet and exercise control

- BGL on admission in target range, treat as no diabetes
- BGL prior to discharge in target range

Management

Type 2 on OHA's

- Omit morning OHA's
- First on list
- Usual fasting regimen
- Diet and fluids as soon as appropriate post operatively – morning OHA's
- If pm surgery may need to omit midday OHA's

Management

Type 1 and Type 2 on insulin

- Minimal variation to usual regimen
- First on list
- Morning surgery omit morning insulin
- Diet and fluids as soon as appropriate post operatively – morning insulin
- If pm surgery, EMB and usual – $\frac{1}{2}$ normal insulin dose, omit lunch time insulin until eating and drinking

Management

- Check BGL at least 2 hourly
- Target glycaemic range before discharge
- Tolerating diet and fluids i.e. have eaten a meal
- Ketone testing