

Diabetes



Diabetes is a life-long illness.

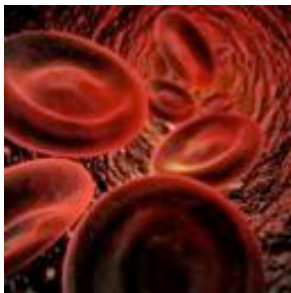
It is caused by having a high amount of glucose (a type of sugar) in your blood.



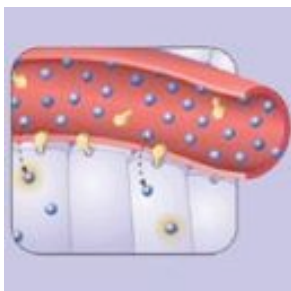
Diabetes affects more than 2 million people in England and Wales.



How does Diabetes happen?



Normally, a hormone called insulin controls the amount of sugar in the blood.



When food is eaten and broken down, it goes into your blood.

Insulin helps to move any sugar (glucose) out of the blood and into cells.

It is then broken down to make energy.



If you are diabetic, there is a problem with this insulin system, and your blood sugar levels.

If you have diabetes, your body is not able to fully use the sugar (glucose) in the blood stream.



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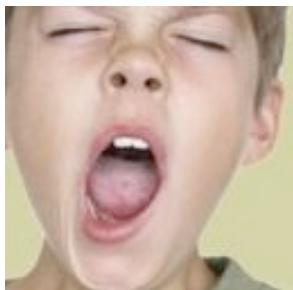
The main symptoms of Diabetes



- Feeling very thirsty.



- Going to wee a lot.



- Feeling tired a lot (fatigue).



- Weight loss



- Getting a thrush infection (around the penis or vagina), often as a result of the extra sugar in your urine.



- Your sight becoming blurred (unclear).



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How to find out if you have Diabetes



It is important that you find out if you have diabetes as early as possible so that treatment can be started.



You should see your doctor as soon as possible.

The doctor will ask you some questions and will also ask you to do a wee sample (in a pot they give you).



Blood, and Urine (wee) tests



Your wee sample will be tested to see if it contains sugar (glucose).

Normally, wee does not contain sugar (glucose).



If your wee contains sugar (glucose), your doctor will carry out a blood test. This will tell you if you have diabetes.



If your blood sugar (glucose) levels are not high enough for your doctor to know if you have diabetes, you may need to have a test in your mouth.

This is called a glucose tolerance test (GTT).



Your doctor will give you a sugar drink.



Your doctor will take blood tests every 1/2 an hour, for 2 hours.

This will let him/her see how your body is dealing with the sugar.



Diagnosing diabetes:

If you are told you have diabetes, your doctor may do more blood and urine (wee) tests to find out what kind of diabetes you have.



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Type 2 Diabetes

Most people with diabetes have Type 2 diabetes



Type 2 diabetes happens when either your:

- Body cannot use its insulin.
- Body cannot make enough insulin.



Diabetes can be easily controlled by careful eating, and checking your blood sugar levels.



Type 2 diabetes can get worse.

You may need to take insulin medicine.

This will usually be an injection.



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Risk factors for Type 2 Diabetes



The exact cause of type 2 diabetes is not fully known.

There are some things that make you more likely to get diabetes:



Being Fat or Obese



In most cases, type 2 diabetes is linked to having too much body fat.

If you are fat or obese, your body does not work well with insulin.

Most people who get type 2 diabetes are fat or obese.



Ethnic Origin



You are at least 5 times more likely to have Type 2 diabetes if you are African-Caribbean or of south Asian origin, than a white person.



Age



Your chance of getting Type 2 diabetes increases as you get older.



You are more likely to get diabetes if you are:



- over 40 years of age and white



- or over 25 years of age and black, Asian, or from a minority ethnic group.



- However, some children as young as seven are now being diagnosed with Type 2 diabetes.



You are more likely to get diabetes if you have a close relative like a parent who has Type 2 diabetes.



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Monitoring (checking) your Blood Glucose Levels



A health professional will need to check your blood sugar (glucose) level every 2-6 months.



You will also need to keep an eye on your own blood glucose levels.

This is with a blood test you can use yourself at home.

You may need to do this up to 4 (or more) times a day.



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Medicines for Type 2 Diabetes (glucose-lowering tablets)



If regular exercise and healthy food are not controlling your blood sugar (glucose) levels, you may need medicines.

There are several different types of medicines, often given as tablets.



You may need to take a mix of 2 or more medicines to control your blood sugar (glucose) level.

Here are some of the medicines:



Metformin

Metformin is often the first medicine that is tried.



It works by controlling the amount of sugar (glucose) in your blood.



Sometimes it can make you feel sick and have diarrhoea (runny poo).

You may not be able to take it if you have kidney problems.



A type of medicine called a Sulphonylurea.

You may be prescribed one of these medicines if you cannot take Metformin or if you are not fat.



Sulphonylureas can increase the risk of having a 'Hypo' (low blood sugar glucose).



Sulphonylureas may sometimes make you put on weight, feel sick and have diarrhoea (runny poo).



Acarbose



Acarbose is not often used to treat Type 2 diabetes because it can cause bloating and diarrhoea (runny poo).

You may be prescribed acarbose if you cannot take other types of medicines for Type 2 diabetes.



A type of medicine called a Thiazolidinedione



For example, Pioglitazone or Rosiglitazone.



Sometimes, Thiazolidinediones can damage your liver.

While taking one of these medicines you will need regular blood tests to check that your liver is working properly.



This medicine may also cause you to put on weight, and in rare cases, it may cause hyperglycaemia (high blood glucose).



Nateglinide and Repaglinide

These medicines are not often used.

This is because they do not work for very long.

They work when taken just before you eat.



Nateglinide and Repaglinide can cause unwanted side effects, such as putting on weight and Hypoglycaemia (low blood sugar).



Insulin treatment

You may need to have insulin treatment if glucose-lowering tablets are not working.

Insulin treatment can be taken to replace tablets, or alongside tablets.



Insulin comes in several different types.

Some work for a whole day, and some last only a short time



Insulin Injections



In many cases of diabetes, you will need to have insulin injections.



Insulin must be injected. It can't be taken as a tablet.



If you need to take insulin by injection, your diabetes care team will tell when you need to take it.



They will also show you how to inject it yourself or with the help of your supporter.



They will also give you advice about storing your insulin and getting rid of your needles properly.



Insulin injections are given using either a syringe, or an injection pen, which is also called an insulin pen (auto-injector).



Most people need between 2-4 injections a day.



Your GP or diabetes nurse will also teach one of your close friends or family how to inject the insulin properly.



Insulin Pump Therapy

An insulin pump is a small piece of equipment that holds insulin.

It is about the size of a pack of playing cards.



The pump is attached to you by a long piece of thin tubing, with a needle at the end. This is put under your skin.



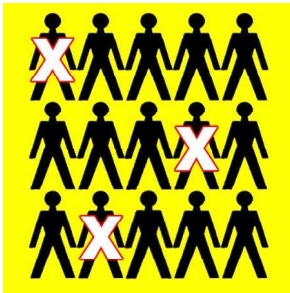
Most people insert the needle into their stomach but you could also insert it into your hip, thigh, buttock or arm.



The pump allows insulin to flow into your bloodstream at a rate that you control.



This means that you no longer need to give yourself injections.



However, it may not be suitable for everyone.



Insulin Jet System



The insulin jet system is a new piece of equipment to give you insulin without using a needle.

It can be used on your stomach, buttocks, and thighs.



You can get this through the NHS.



The insulin jet works by forcing insulin through a nozzle that is placed against your skin.

The insulin travels very fast and passes through your skin.



Your diabetes care team will be able to advise you about whether this treatment is suitable for you.



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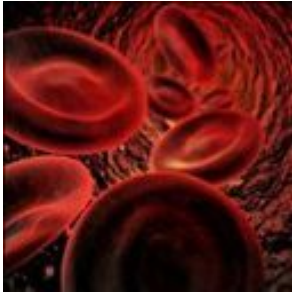
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Diabetes

'Hyper' (short for Hyperglycaemia)



This is when your blood sugar levels become too high.



If your blood glucose levels become too high, you may experience what is known as a 'Hyper' (Hyperglycaemia).



The symptoms of a Hyper are similar to the main symptoms of diabetes.

However, they may be stronger and sudden.

They include:



- Thirst.



- A dry mouth.



- Blurred vision.



- Drowsiness (feeling sleepy).



- Needing to wee a lot.



A Hyper can happen for several reasons including:



- Eating too much.



- Being unwell.



- Not taking enough insulin.



If Hyperglycaemia occurs, you may need to change the food you eat.



Or, you may need to change the amount of insulin you take.

Your diabetes care team will advise you about the best way to do this.



If Hyperglycaemia is left untreated, it can be very serious.

You should contact your doctor straight away.



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Other Treatments



If you have diabetes, you have a bigger chance of having heart disease, stroke and kidney disease.

To stop this happening, you may be advised to take:



- Medicines to control high blood pressure.



- A type of medicine called a **Statin** – **this is** to lower your high cholesterol (a fat-like substance in your blood).



- Low dose aspirin to prevent stroke.



- A medicine called an ACE Inhibitor, if you have early signs of diabetic kidney disease



It is also suggested that you have a flu injection each year. You should also have a vaccine called Pneumococcal Polysaccharide Vaccine (PPV).



Regular Check-Ups



Your GP or diabetes care team will need to check your eyes, feet and nerves regularly because they can be affected by diabetes.



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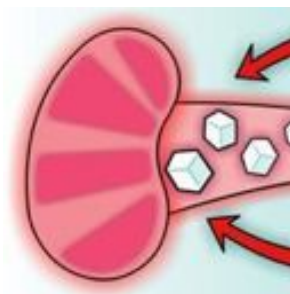
Diabetes

'Hypo' (short for Hypoglycaemia)



If you have diabetes and you are having treatment, your blood sugar (glucose) levels can become very low.

This is known as a 'Hypo' for short.



A Hypo happens when any insulin that is in your body moves too much sugar (glucose) out of your bloodstream.



A Hypo often happens if you:



- Take too much insulin



- Skip a meal



- Exercise hard



- Drink alcohol without eating before



Symptoms of a 'Hypo' can be:



- Feeling shaky and grumpy



- Sweating



- Tingling lips



- Feeling weak



- Feeling hungry



- Feeling sick



A Hypo can be controlled by eating or drinking something sugary, like a fizzy drink.

This should stop the attack.



After you have had something sugary, eat something like a biscuit or a sandwich.



If a Hypo is not brought under control it can lead to:



- Confusion



- Slurred speech



- Collapsing



If this happens, you will need emergency treatment.



This could be an injection of a hormone called Glucagon.

This increases the level of sugar in your blood.



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Treatment for Diabetes



If you have Type 2 Diabetes, you will need to look after your health very carefully.



It is important that you eat healthy food and exercise.



Your doctor and Diabetes care team will be able to advise you.



They may also refer you to other specialists within your care team, such as a Dietician, for extra advice and help.



Some of the advice that you will be given is below:



Eat Healthily



It is not true that if you have Diabetes you need to eat different food to other people.



Your diet should be the same as that of anyone else - high in fibre, fruit and vegetables and low in fat, salt and sugar.



However, different foods will affect you in different ways. A Diabetes Dietician can help you to work out a food plan especially for you.



Exercise Regularly

Exercise lowers your blood sugar level.

It is important to exercise regularly if you have Diabetes.



This can be any activity that gets you slightly out of breath and raises your heart rate.



However, you should not start a new activity without talking to your doctor or Diabetes care team first.



Do not Smoke



If you have Diabetes, you have a bigger chance of having a Heart Attack or Stroke.



If you smoke, you are even more likely to have a Heart Attack or Stroke, as well as conditions like Lung Cancer.



If you smoke and would like to give up, your GP will be able to help.



Drinking Alcohol



If you have Diabetes, you should as little alcohol as possible



You should never drink alcohol if you haven't eaten!



Alcohol can cause either high, or low, blood sugar levels (Hyperglycaemia or Hypoglycaemia).



Drinking alcohol may also make it dangerous for you to carry out insulin treatment by yourself.



For men, the recommended daily amount of alcohol is between 3-4 units. (about 1 pint).



For women, the recommended daily amount is between 2-3 units. (1 glass of wine).



Tell others about your Condition



If you have Type 2 Diabetes, you should wear an identity bracelet.

This will let others know that you have Diabetes.



If you black out or collapse, emergency healthcare professionals will then know that you have Diabetes.



You should also carry an emergency Glucagon kit with you in case of Hypoglycaemia (low blood glucose).



Your Diabetes care team should train you, plus several of your family members, and close friends, in how to use it.



Look after your feet



If you have Diabetes, you are more likely to get problems with your feet.

You may have foot ulcers and infections from minor cuts and grazes.



You should keep your nails short and wash your feet daily using warm water.



Wear shoes that fit properly and see a Podiatrist or Chiropodist (a specialist in foot care) regularly so that any problems are found early.



You should also check your feet for any cuts, blisters or grazes.

You should see your GP if you have a minor injury to your foot that does not get better in a few days.



Have regular eye tests



You should have your eyes tested at least once a year to check for a problem called **Retinopathy**.



Retinopathy is an eye condition where the blood vessels in your eye become damaged (get hurt).

If untreated, Retinopathy can eventually cause blindness.



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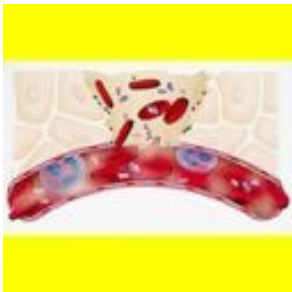
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What happens if diabetes is not treated?



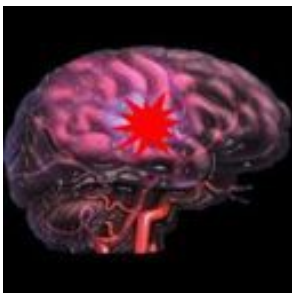
If your diabetes is not treated, it can lead to many different health problems.



Large amounts of sugar (glucose) in your blood can damage blood vessels, nerves and organs.



Heart disease and stroke

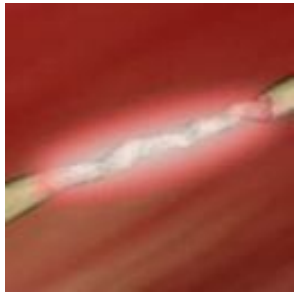


If you have diabetes, you are more likely to have heart disease and a stroke (a stroke is when blood does not get to the brain).



If you don't look after your sugar (glucose) level, it could result in angina (pain in the chest).

You could have a heart attack or stroke.



Nerve Damage



If your blood sugar (glucose) level is too high, it can damage (hurt) your nerves.



This can give you a tingling or burning pain in your fingers, toes and up through your arms and legs.



If the nerves in your stomach are damaged, you may feel sick.

You may also have diarrhoea (runny poo) or constipation (when it is hard to poo).



Retinopathy (damage to the back of the eye)



If you do not control your sugar (glucose) levels, your sight can be damaged.

If the nerves are damaged, it can stop the light reaching the back of the eye (where the retina is).



You should have an eye test each year.

This can pick up any signs of any possible eye problems.



Kidney Disease



If the small blood vessels are damaged, your kidneys won't work so well.

Your kidneys are very important as they clean your body.



They could even stop working and you may need a kidney transplant.



Foot Problems



If the nerves of your foot are damaged, small cuts can turn into ulcers (sore area of skin).



About 1 in 10 people with diabetes get foot ulcers.

This can cause serious infection.



Check your feet every day.

Look out for sores and cuts that do not heal.

Check for swelling and skin that feels hot to the touch.



Tell your doctor, nurse or podiatrist (foot specialist) about any changes in your feet.



You should also have a proper foot check by a professional at least once a year.



Impotence in men (when your penis does not get hard).



If you have damaged nerves, it may be hard for you to get an erect (hard) penis.

This is more likely if you smoke.



This can be treated with medicine.



Miscarriage and Stillbirth



Women with diabetes have more of a chance of miscarriage and stillbirth (the baby dying before it is born).

Or the baby may have a physical disability.



Pregnant women with diabetes will usually have their baby check-ups in hospital or in a diabetic clinic.



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