

**ndss**  
national diabetes services scheme



**Diabetes  
Australia**

## **Diabetes in hospital**



**Caring for your diabetes  
while you are in hospital**

## Why is the care of diabetes in hospital important?

Regardless of the reason for your admission, it is important that your diabetes is well managed. Always let your nurses and treating doctors know that you have diabetes.

Managing your blood glucose levels before, during, and after your stay in hospital will help to **ensure that you return to your usual level of health.**

It is **common for glucose levels to become higher** than usual in hospital for people with, and without, diabetes. During times of illness it can become more difficult to manage your diabetes.

Changes that can occur include:

- high glucose levels,
- increased risk of infection,
- slow wound healing,
- a higher risk of low blood glucose levels,
- the need to test your blood glucose levels more often,
- an increase, or change in your diabetes medications,
- a specialist diabetes team may become involved in your care.



## Blood glucose testing in hospital

- Hospital staff may need to take your **blood glucose levels more often, and at different times.**
- The standard times that blood glucose tests are taken are just before meals, and/or 2 hours after meals, and sometimes, during the night.
- The aim is to keep the blood glucose levels **less than 10 mmol/L, if possible.**
- BGLs less than 5mmol/L are too low, and may lead to **hypoglycaemia** ('hypo', or low blood glucose). When a 'hypo' is severe, you may feel hungry, sweaty, shaky, or dizzy. It is important to tell a nurse if you feel these symptoms, as a severe and untreated hypo can lead to a loss of consciousness.

## Treatment to expect in hospital

If your blood glucose levels go above the target, then **extra diabetes medication may be needed.** This may include extra tablets, or sometimes insulin. Many people need insulin when they are ill – even if they did not need it at home. Sometimes extra injections may be given if your glucose levels are very high.

- **If you are fasting** (having no food or drink) then you may need to have the insulin and glucose you require through an intravenous infusion or 'IV' (often called a 'drip'). If on a 'drip' you will need to have your blood glucose checked more often, sometimes this will be every hour. You might also need an insulin drip if you are unable to eat for long periods.
- As you get better the insulin can often be reduced or stopped. In other cases, the extra insulin, or other diabetes medications, may need to be continued.



## After discharge:

- Continue good management of your diabetes to prevent diabetes complications, and maintain your health.
- If you wish to receive further advice about managing your diabetes, you can ask your nurse to arrange for a Diabetes Educator to see you while you are in hospital, or after you go home.
- Diabetes Australia and the NDSS have information for people with diabetes and their families. **The contact number is: 1300 136 588**



The development of this NDSS booklet was coordinated by the Inpatient Working Party, on behalf of the Australian Diabetes Society which is an agent of the NDSS. The NDSS is an initiative of the Australian Government administered by Diabetes Australia.



Local Diabetes Service Contact information:

Visit [www.ndss.com.au](http://www.ndss.com.au) or call **1300 136 588**

For more information: talk to the doctors or nurses looking after you, your General Practitioner, Diabetes Educator, or Endocrinologist.