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Sick day management

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Introduction: Diabetes self-management contributes not only to a better glycemic control but also to avoiding the immediate or chronic complications, as well. Nevertheless, some infections or generally sick days may lead either to hypoglycaemia or hyperglycaemia. A plan, well organized by the health care diabetes team is introduced to help the individual with diabetes to overcome acute complications.

Method: The databases PubMed and Google Scholar were searched to access relevant articles. The keywords were "diabetes", "sick days", "self-management" "diabetes care team", "acute complications".

Results: Stressful events such as illness, trauma and surgery worsen glycemic control. Intercurrent illness can cause a rise or fall in blood glucose levels. On one hand, fever is associated with high blood glucose levels and can result in increased production of ketones causing diabetes ketoacidosis. On the other hand, vomiting and diarrhea are associated with lowering

of the blood glucose levels and may cause hypoglyceamia. The diabetes care team should provide guidelines on managing diabetes during intercurrent illness in order to prevent complications such as ketoacidosis, dehydration, hyperglycaemia or hypoglycaemia. Some of the management plan are: frequent monitoring of the blood glucose and blood or urine ketone levels, avoidance of stopping insulin, maintenance of adequate fluid and electrolytes, treatment of the intercurrent illness and guidance to patients and family members regarding insulin dose adjustment.

Conclusion: For avoiding sick days complications, healthcare professionals should advise the patients and family members to keep a sick day notebook that includes management plan for sick days, contacts of the diabetes care team for emergency consultation, medicines that can be used and meal plans according to the patient's requirements.

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