

## Signs of Hypoglycemia

- Palpitation
- Sweating
- Giddiness, Headache
- Seizures
- Altered behaviour, hunger

## Management of Hypoglycemia

- 2 spoons of glucose to be taken

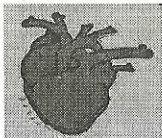
## Signs of Hyperglycemia

- Increased thirst
- Increased frequency of urination
- Hunger, weight loss
- Non healing ulcer
- No symptoms

## Long term complications & its Early detection



Annual EYE check up



Annual ECG & fasting cholesterol to be done once in a 6 months



Urine Microalbumin, Creatinine to be done Annually.

## Foot Care



Soak feet in luke warm water for 15 minutes and scrub, softly with a nylon scrubber. Self foot examination of foot to be done on a daily basis. Micro Cellular Rubber (MCR) foot Wear should be used.

Diabetes mellitus is a major public health problem.

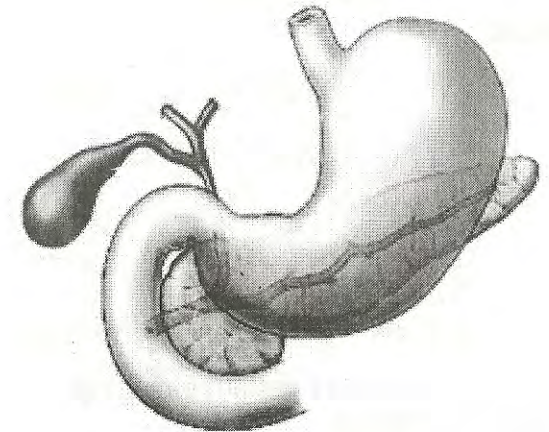
## Project Hope address

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# DIABETES EDUCATION



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## Risk Factors

- Age > 30 years
- Obesity, lack of Exercise
- Family History

## Pathophysiology

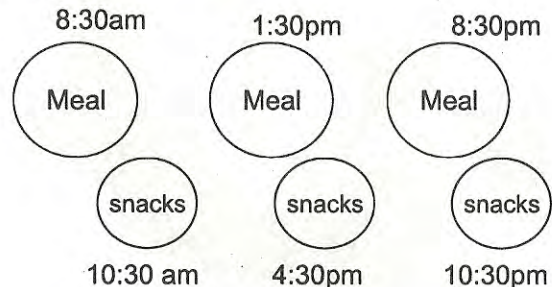
Insulin is produced in Pancreas. Which controls the sugar. It acts as a key and pushes the excess glucose from the blood in to the muscles and tissues. When insulin is not enough or not secreted the glucose in the blood increases.

## Target Sugar Level

Fasting -  
2hr after -

## Management

### Diet:



3 meal & 3 snacks pattern including Bed time snacks.

(Timings to be individualized according to patients life style.)

### Foods to be taken

Vegetables and Fruits can be taken as per your dieticians advice.

## Foods to be avoided

Frank sugar, juices, soft drinks  
Dates  
Honey  
Jam  
Jaggery  
Oily food items

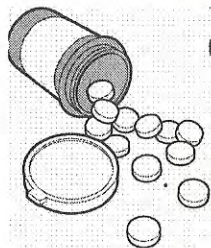
## EXERCISE

- 20 to 40 mins brisk Walking
- Jogging
- Cycling
- Swimming

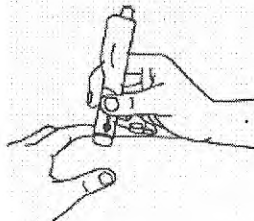


30 minutes prior to an exercise snacks should be taken

## Medications

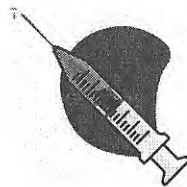


Self adjustment of tablet doses is dangerous



Regularity of Medications Should be maintained

Self adjustment of insulin should be learnt.



## Insulin Site

- Three finger away from the umbilicus which can be extended upto the sides of the abdominal wall.



## Storage

- Should be refrigerated.
- If refrigerator is not available a mud pot with water inside which medicine can be stored and used.
- During travel a flask with ice cubes can be used for storage of insulin.



## Self monitoring of blood glucose

- Patients on diabetic drugs can check weekly once four times a day.(fasting, 2hrs post breakfast, 2hrs post lunch & 2hrs post dinner)
- Patients on insulin can check two days in a week for four times a day.(fasting, 2 hrs post breakfast, 2hrs post lunch & 2hrs post dinner or more frequently)

