



Type 2 Diabetes
An information booklet for
Mental Health Service Users



Type 2 Diabetes: A guide for Mental Health Service Users

Introduction

You may be reading this guide because you have been diagnosed with Type 2 Diabetes (**die – a – beat – ease**), or you know someone who has it, or you just want some information about it.

What is Type 2 Diabetes?

Type 2 Diabetes is a long-term condition where there is too much glucose (**glue – kose**) (sugar) in the blood.

Where does glucose come from?

Glucose comes from the food we eat. Carbohydrates (**Car – bow – high – drates**) in bread, pasta or potatoes or sugar from sweets, crisps, chocolate or fruit all raise the level of sugar in our blood.

What causes Type 2 Diabetes?

Type 2 Diabetes happens because there is a problem with the way our body produces or uses insulin (**in – sue – lin**).

What is insulin?

Insulin is a hormone that is made by the pancreas, which is a gland in the body. Insulin helps us to use the sugar we take in as food in our blood properly and not to let the sugar levels in our blood build up.

What types of diabetes are there?

There are two types of diabetes.

Type 1 – where the pancreas **does not make** insulin

Type 2 – where the pancreas **does make** insulin but it is not used well by our body. We may not make enough insulin or our body becomes resistant to it. This leads to more sugar in the blood, which can cause problems.

How do we manage diabetes?

In Type 1 Diabetes, we have to inject insulin, as there is none in the body and the body cannot make it.

In Type 2 Diabetes, we have some insulin in the body but not enough. Therefore, if we change our diet and take some exercise our body can use the insulin better. Sometimes we might need to take a tablet to help our body use its own insulin, as well as changing diet and taking exercise. Diabetes is a long term condition so

depending on how successful diabetes control is, we may need to take insulin to help with our diabetes.

What is diabetes control?

Diabetes control is keeping the levels of sugar in your blood at the target levels set for you. For most people, this means eating a healthy diet with as much fibre as possible, taking regular exercise and the medications given to you by your diabetes doctor.

What are the risk factors for Type 2 Diabetes?

Risk factors are things that increase the chances of developing Type 2 Diabetes. For example

Age – the risk of getting Type 2 Diabetes increases with age but the good news is you can keep that risk low by eating a healthy diet, exercising regularly and not being overweight

Lifestyle – having a poor diet with lots of calories and fat, low intake of fruit and veg, not engaging in physical activity can increase the chance of getting Type 2 Diabetes

Weight – being over weight and obese (this can be linked to lifestyle factors)

Past Medical History – if you have had heart problems e.g. high blood pressure

Family History – if someone in your immediate family has diabetes

Ethnicity – people from some ethnic backgrounds e.g. people from Asian and African Caribbean cultures seem more at risk of diabetes than others

Alcohol and Smoking – are risk factors for diabetes and other serious physical conditions

Medications – some medications used in the treatment of mental health problems can lead to weight gain and Type 2 Diabetes. The doctor knows this risk but feels that you need these medications. **Remember**, you should not stop taking any medications without first talking with your nurse, care co-ordinator or doctor.

What are the symptoms of Type 2 Diabetes?

Type 2 Diabetes can be a silent disease – you can have it but not realise it because it is often without symptoms in the early stages. Nearly half of people with Type 2 Diabetes may be unaware that they have it. This is because symptoms of Type 2 Diabetes are gradual and in the beginning, you may not recognise them. You might

even notice them but put them down to other things like just getting older or medication side effects.

Symptoms of Type 2 Diabetes to be aware of include

- Being very thirsty and drinking a lot – (much more than you would normally drink)
- Going to the toilet a lot, especially during the night time
- Being tired and lacking energy
- Having unplanned weight-loss – losing weight when you are not dieting
- Having eye problems such as blurred vision

These symptoms sound familiar to me

You are right in thinking that these symptoms sound familiar, as they can also be side effects caused by medication taken for mental health problems.

However, a difference between side effects and the symptoms of diabetes is **time**. Medication side effects can go away as your body becomes used to the medication. You may also be taking other medications to help with any side effects, which may reduce the time you have them.

Symptoms of diabetes will persist and may get worse without treatment. If you notice these symptoms, you

should mention them to your nurse, psychiatrist, care co-ordinator or GP. If you have not yet been screened for diabetes and have these types of symptoms persistently, you should ask to be screened. This may prove nothing but it may set your mind at ease.

The problem with Type 2 Diabetes is that, if it is not recognised early, it remains untreated and this can lead to complications.

How is Type 2 diabetes managed?

Type 2 Diabetes can be (and is) effectively managed with lifestyle changes and medication.

Lifestyle changes include eating healthily and exercising. This will help you to lose weight, which is important in general but more so with Type 2 Diabetes. Drink up to 2 litres of water a day and try to stop drinking fizzy drinks that are high in sugar and calories. If you like tea and coffee, try to reduce the amount of sugar you use or use an artificial sweetener. Sweets and biscuits are also high in calories so you will need to reduce these or try different types that have less calories and sugar e.g. switch from a muffin to a scone.

You may have to take an oral medication e.g., metformin, which helps the body use the insulin it has better. It can also reduce the amount of sugar that gets into the blood.

What are the complications associated with Type 2 Diabetes?

Complications can occur in Type 2 Diabetes and especially if diabetes control is not good. However, there is a greater chance of these happening if you do not make some lifestyle changes (like changing your diet or exercising) or taking your diabetes medication as prescribed. You also need to attend all your diabetes review appointments, if you miss one always make sure to re-arrange it. Ask your nurse, doctor, key worker or care co-ordinator for help with this.

Complications usually happen in the long term and can include

- Eye problems such as blurred vision and loss of eye sight
- Kidney problems
- Heart disease
- High blood pressure
- Stroke
- Impotence in men
- Foot problems e.g. loss of feeling
- Circulation problems e.g. numbness or coldness in your feet

If you experience any of these let your nurse or doctor know as soon as possible so they can be investigated.

Complications can be acute or long term. Acute means they can happen very quickly, long-term means they may occur over a longer period e.g. years.

If you notice any of these complications, you should discuss them with your nurse, doctor, key-worker, care co-ordinator or GP.

Acute complications

Acute complications are ones you, or others who know about diabetes, will notice immediately. The two key ones are

- Hyperglycaemia (**high – pear – gli – seem – e – a**)
- Hypoglycaemia (**high – po – gli – seem – e – a**)

Hyperglycaemia

Hyper means **high**. In hyperglycaemia, there is a high sugar level in your blood. This can be caused by a number of things such as

- Not taking your diabetes medication regularly - you need to take your diabetes medication as prescribed to prevent you becoming hyperglycaemic

- Not changing your lifestyle - taking diabetes medicine does not mean you do not need to change your lifestyle a little. Remember it is a combination of healthy eating, exercise and diabetes medicine!
- Illness – if you have a cold or flu or an infection this can increase your blood sugar levels
- Stress – In times of stress, our blood sugar can go up. If you are feeling stressed talk with your nurse, doctor, key-worker or GP about this to ensure it does not affect your blood sugar levels too much.

Symptoms of hyperglycaemia include, feeling tired or lacking energy, having blurred vision, being thirsty, going to the toilet a lot, nausea, feeling hungry, muscle cramps or confusion.

What should I do if I get hyperglycaemia?

If you notice these symptoms over a few days then speak with your nurse, doctor, key-worker, care co-ordinator or GP immediately. You should also let your carer or family know so that they can help you also.

Not seeking help for high blood sugar levels could lead to a more serious condition of severe drowsiness and altered breathing.

Hypoglycaemia

Hypo means **low**. In hypoglycaemia, there is a low sugar level in your blood. Not everyone with Type 2 Diabetes is at risk of hypoglycaemia. It is a side effect of some medications. Check with your nurse, doctor or pharmacist if your medications leave you at risk of hypoglycaemia.

If your medications are leaving you at risk of Hypoglycaemia you increase your risk by

- not eating regularly - e.g. missing meals or snacks,
- taking a lot more exercise that you normally do
- drinking alcohol

Symptoms of hypoglycaemia include, feeling weak, dizzy or faint, trembling, feeling hungry, sweating a lot and maybe being confused or irritable. You might also faint or pass out.

What should I do if I get hypoglycaemia?

If you notice these symptoms, you should eat or drink something sweet e.g. a glass of orange squash, a fizzy drink, some sweets or sweet biscuits. You might need to do this twice, with a 5-minute interval, so that your blood sugar levels come up.

You should also speak with your nurse, doctor, key-worker, care co-ordinator or GP immediately as you may need to have your treatment reviewed.

However!

If your diabetes is stable and well controlled and you are trying to make lifestyle changes, the chances of these happening are reduced. However, you should always report any of these symptoms or experiences so that your diabetes treatment can be tailored to meet your needs.

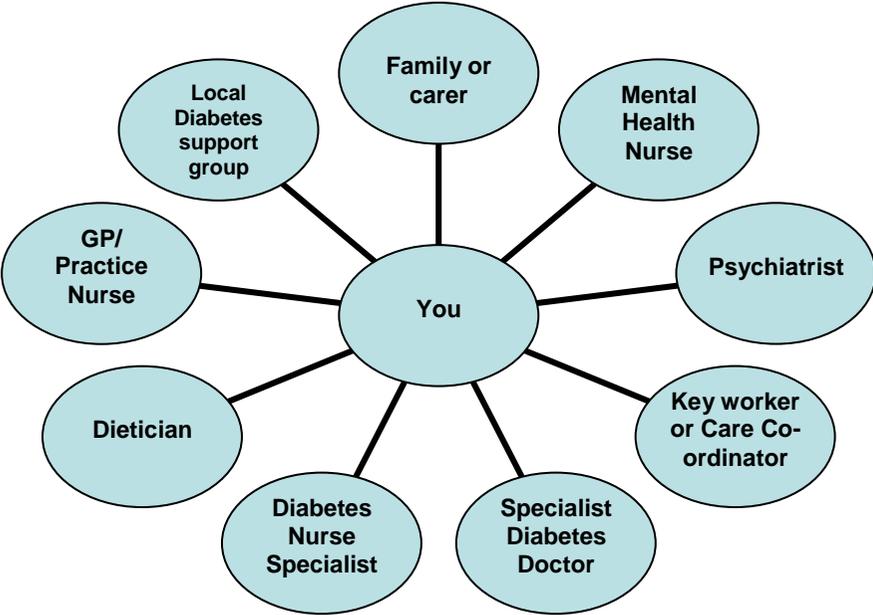
Who will help me manage my Type 2 Diabetes?

Many people will help you. The most important person is you, as you will have to make some changes to your diet and physical activity. Others will be there to support, advise and encourage you to keep them up. Your family or carer is important especially if you experience hyperglycaemia or hypoglycaemia as they can help you to get over these. They can also be there to help and remind you to take medication and attend appointments.

Your key-worker, care co-ordinator or GP are also going to help you so make sure that you involve them and keep them informed of how you are coping. They will probably rely on the help of diabetes specialists such as a diabetes nurse specialist or a specialist diabetes doctor.

It is important that everyone communicates with each other, so that you get the best possible care. If you are unsure of anything, ask for things to be clarified; people will be happy to explain things to you so that you can look after yourself better.

Your psychiatrist will also help you to ensure your mental health medication is best suited to your needs. You should **not stop** your mental health medication but you should discuss this with your care co-ordinator and psychiatrist.



Other resources

Very good resources exist. Ask your nurse, doctor, key-worker, care co-ordinator or GP for diabetes information leaflets.

If you can get the internet then there are diabetes charities with good sites e.g.

<http://www.diabetes.ie/>

<http://www.diabetes.org.uk/>

<http://www.nhs.uk/Conditions/Diabetes/Pages/Diabetes.aspx>

<http://www.hse.ie/eng/services/Publications/topics/Diabetes/>

<http://www.who.int/diabetes/en/>

Some questions you might like to ask

1. What type of diabetes do I have?
2. What symptoms of diabetes do I need to look out for?
3. Will I need to take any special medications? If so, can someone explain them to me?
4. Do I need to test my blood? If so, can someone help me and show me how to do this?
5. What should I look out for if my diabetes is getting worse?
6. What should I do if my blood sugar goes too high
7. What should I do if my blood sugar goes too low
8. Will I be able to see other doctors about my diabetes?
9. Will my mental health treatment be affected by diabetes?
10. Can you tell me where to get information about diabetes or about diabetes support groups?

Remember, you are not alone.

Having diabetes does not need to be scary. Many people can help you with it. The most important person is you. Everyone will want you to be as well as you can be and your health and well-being will be the main focus.

Type 2 Diabetes can be, and is, effectively treated and managed. While it is a complex condition and we should not underestimate it, you can still lead a long and healthy life with it.

<p>A C ME© Publication 2012</p> <p>CME is a campaign that seeks to raise awareness of mental health stigma in health and social care professionals.</p> <p>C-ME@live.ie</p>		
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