# Having an Afternoon Endoscopy Procedure (Gastroscopy / Bronchoscopy / EBUS)



Authors: Dr J Randall; Kim Howson, Perioperative DSN; and Miriam Batley, Endoscopy CE

#### For patients taking insulin and / or other diabetes medications

You will be expected to fast for six hours prior to the procedure.

This leaflet contains the information you will need to safely manage your diabetes throughout the day prior to the procedure and the day of the procedure.

If you are on Insulin pump therapy to manage your diabetes, please contact the Endoscopy Unit on 01493 452370 and your Diabetes Nurse prior to your procedure.

#### What to do with your insulin for your procedure

If you are on insulin please see the following chart. The changes you need to make on the day before, the day of and after the procedure. These depend on the insulin you are taking. Please be sure to follow the instructions for your insulin below.

| Name of insulin   | Day prior to procedure                 | Morning of procedure   | Afternoon of Procedure                           |  |
|---|--|--|--|--|
| Mixed/ Biphasic Insulin   |  |  |  |  |
| Humalog Mix 25 or<br>Mix 50<br>Humulin M3<br>Humulin R500<br>Hypurin Porcine<br>30/70 Mix<br>Novomix 30 | Take normal insulin dose with meals.   | Light breakfast<br>Take 50% normal<br>insulin dose.<br>Omit lunch time dose<br>(if applicable) | Take evening dose as<br>normal                   |  |
| Intermediate or Long-acting/ Basal Insulin  |  |  |  |  |
| Abasaglar   | Taken in the morning                   |  |  |  |
| Humulin I<br>Insulatard   | Take normal insulin dose               | Take 50% normal<br>insulin dose  | Take 25% normal insulin dose with lunch          |  |
| Lantus  | Taken in the evening                   |  |  |  |
| Semglee<br>Toujeo   | Take normal insulin dose               | No change (No<br>insulin at this point)  | Take evening dose as normal                      |  |
| Tresiba   | Taken twice daily                      |  |  |  |
|   | Take normal insulin dose               | Take 50% normal<br>insulin dose  | Take evening dose as normal                      |  |
| Basal bolus regimen – For basal adjustment see above  |  |  |  |  |
| Apidra<br>Actrapid<br>Fiasp<br>Humalog<br>Humulin S<br>Insuman Rapid                                    | Take normal insulin dose<br>with meals | Take 50% normal<br>insulin dose with light<br>breakfast.<br>Omit lunch time<br>dose.           | Take evening dose as<br>normal with evening meal |  |
| Lyumjev<br>Novorapid<br>Trurapi   |  |  |  |  |

| What to do with your diabetes medications for your procedure   |                          |                                      |  |  |
|--|--------------------------|--------------------------------------|--|--|
| If you are on other diabetes medications (as well as insulin or instead of insulin) see the chart below. |                          |                                      |  |  |
| Name of medication   | Morning of procedure     | After procedure                      |  |  |
| Acarbose   | Take morning dose – omit | Take evening dose as normal          |  |  |
| Repaglinide  | lunch time dose          |                                      |  |  |
| Gliclazide   | Omit breakfast dose      | Take evening dose as normal          |  |  |
| Glibenclamide  |                          |                                      |  |  |
| Glipizide  |                          |                                      |  |  |
| Glimepiride  |                          |                                      |  |  |
| Dapagliflozin  | Omit for 4 days prior to | Restart next morning once eating and |  |  |
| Empagliflozin  | procedure                | drinking normally                    |  |  |
| Cannagliflozin   |                          |                                      |  |  |
| Sotagliflozin  |                          |                                      |  |  |
| Metformin (Sukkarto)   |                          |                                      |  |  |
| Pioglitazone   |                          |                                      |  |  |
| Alogliptin   | No change except         |                                      |  |  |
| Linagliptin  | if taking Rybelsus       |                                      |  |  |
| Sitagliptin  | then omit dose           | No change                            |  |  |
| Saxagliptin,   |                          |                                      |  |  |
| Vildagliptin   |                          |                                      |  |  |
| Exenatide  |                          |                                      |  |  |
| Liraglutide  |                          |                                      |  |  |
| Dulaglutide  |                          |                                      |  |  |
| Semaglutide  |                          |                                      |  |  |
| Tirzepatide  |                          |                                      |  |  |

## Monitoring blood glucose levels

If you have a blood glucose meter we advise testing every two hours whilst fasting.

If you usually correct high glucose level using rapid acting insulin you can give a small correction dose if blood glucose levels are greater than 15mmol/L.

# Recognising hypoglycaemia (or a "hypo")

Fasting can make you more likely to become hypoglycaemic. A "hypo" is when your blood glucose is less than 4mmol/L.

You may feel the following symptoms if you are having a hypo:

- Sweating heavily
- Feeling anxious
- Trembling and shaking
- Tingling of the lips
- Hunger
- Going pale
- Palpitations
- Slurring words
- Behaving oddly
- Being unusually aggressive or tearful
- Difficulty concentrating

### How to treat a "hypo" prior to the procedure

If you recognise you are having a "hypo", you should treat it quickly using:

• Lucozade or sugary flavoured water.

If you use a blood glucose meter you should recheck your blood glucose 10-15 minutes following treatment. If levels remain less than 4mmol/L treat again with the above.

Important: Please inform a member of staff if you have had a hypo when you arrive for your procedure.

#### Your Feedback

We want your visit to be as comfortable as possible - talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve it, then ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care.

Before leaving please complete a Friends and Family Test feedback card.

Help us transform NHS services and to support patient choice.



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240

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