



**Wolverhampton
Diabetes Care**

Tablets and Diabetes (Oral hypoglycaemic agents)

Diet and exercise are the bedrock of diabetes management but most people also need some additional treatment to get the best control of their blood sugar.

For many, this is by tablet treatment. These tablets are taken by mouth and drop the blood sugar and so are called oral hypoglycaemic agents. Insulin is given by injection and can not be taken in tablet form because it would be destroyed by the stomach acids before it could work.

Why have people got to take these tablets?

Tablets for diabetes blood sugar control will be given if healthy eating, weight control and exercise alone don't do the trick. These lifestyle changes are usually not enough on their own and your body will most likely need tablets as well. You are not a failure if you end up taking tablets as well. By combining a healthy lifestyle and tablets, you will have better control.

Just remember though, that the tablets are of little help if your diet and lifestyle is not sensible.

What are the different tablet types and how do they work?

There are several types of diabetes blood sugar lowering tablets.

- Metformin improves the body's response to its own insulin, especially in the liver. It's very safe, and is very unlikely to cause the blood sugar to go too low (cause a hypo). It may help with weight loss. It can cause some upset tummy problems but this usually settles. It's not usually used in very thin people or those with kidney, liver or serious heart problems. Most people with diabetes not on insulin should be on Metformin right from the start unless they can't tolerate it or there is a good reason not to use it.
- Sulphonylurea tablets work by stimulating your body to make more insulin. There are many different types with many different names. They are a stronger tablet and lower the blood sugar more effectively and so can cause a hypo (when the sugar is too low). They make it more difficult to lose weight and may cause weight gain.
- Gliptins are a group of drugs that work on the gut hormone system in your body and help your body make more insulin in response to food intake. They come in different strengths. This group of tablets are mostly well tolerated. Some people may experience stomach cramps, loose stools, etc with these tablets. Gliptins do not cause hypoglycaemia (low blood glucose levels) unless they are being taken with other medications such as sulphonylureas or insulin. Gliptins can help with weight loss alongside lifestyle and diet changes.
- Alpha glucosidase inhibitors slow down the uptake of starchy and sugary foods from the gut. They don't cause the sugar to fall to low and they may help with weight. They can cause a loose bowel action and wind.

Will I take more than one type?

Although it's usual to start with one sort, people almost always end up on a combination of two or more different types if one of them alone cannot control your blood glucose level. This is because the body's own insulin supply is falling with time and it needs the combination of tablets to make the most of what is left and to push the body to make as much as it can in order to control the blood sugar.

How should I take my tablets?

Your doctor and nurse will advise you on when to take your tablets. It is important to remember that, if you are ill, do not stop taking your tablets. Never double your dose because you missed a tablet. Don't forget to take your medication even though it can be a bit of a chore. Always keep an accurate record of exactly which tablets you are taking and of the doses.



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Will diabetes tablets work for ever and when will insulin be called for?

No. Diabetes is a progressive condition as the insulin hormone levels fall over time. Diabetes tablets cannot cure diabetes and most people will need increasing doses and will need to take more than one kind of tablet. Eventually, if your blood glucose remains too high, your doctor will recommend insulin treatment. You will know when you need insulin if you are already on at least two different sorts of diabetes tablets in the top dose and your blood tests are not well controlled despite your best efforts with your diet weight and exercise. When this time comes, don't put off insulin treatment because your tablets are no longer likely to be able to improve the situation any further.

Seeking advice and what care to expect

You will be assessed right from the start as to what the best diabetes medication is for you. This should be reviewed each time you see the doctor or nurse. The dosage should be adjusted as you go along to be sure you have the best and safest diabetes control you can achieve. Your doctor will be the best person to decide which tablets you will benefit from most and will choose the tablets which suit your needs. You should have a full explanation of what those reasons are and of any possible side effects. If you have concerns about your medication, or there is something you don't understand, talk it over with the medical team until you get enough information to give you confidence in your treatment. . When and if, the time comes to go to insulin your medical team will help explain the reasons for that fully.