## **Contact Numbers:**

GP.....

Nurse .....

Diabetes Nurse....

NHS Direct: 0845 4647

NHS Diabetes: www.diabetes.nhs.uk

Diabetes UK website: www.diabetes.org.uk

## References

If you require a full list of references for this leaflet please email patient.information@ulh.nhs.uk

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille please email the Patient Information team at patient.information@ulh.nhs.uk

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# Information for people taking steroids who develop steroid induced diabetes

**Diabetes Care Department** 

www.ulh.nhs.uk

#### Aim of the leaflet

This leaflet is aimed at patients taking steroids who may develop steroid induced diabetes and aims to explain what may happen.

#### What are steroids?

Steroids (Glucocorticosteroids) such as prednisolone or dexamethasone are a group of medicines that can be used in the treatment for many conditions e.g. asthma, inflammatory bowel conditions, arthritis and cancer.

# How do steroids affect my blood glucose (sugar)?

- Taking steroids can often cause a rise in blood glucose (sugar) levels. For some people this means they develop a type of diabetes called steroid induced diabetes.
- The rise in blood glucose can be expected to happen within a day or two after starting your steroids. You will find that it is more common for your highest blood glucose readings to be in the afternoon and evening with your blood glucose returning to near normal in the morning.
- High blood glucose levels may cause you to feel exceptionally thirsty and tired and you might find that you are passing an unusual amount of urine and your vision may become temporarily blurred.
- It is very important that you complete your course of steroids even if you develop steroid induced diabetes.

# How to manage your blood glucose levels whilst on steroids

It might be recommended that you start to measure your blood glucose levels whilst you take steroids. Your practice nurse/diabetes nurse will provide you with the equipment and show you how to do this.

#### **Diabetes treatment**

- If your blood glucose levels are high the doctor may want to start you on some tablets to help control this. Whilst on steroids the aim of the diabetes tablets is to keep your blood glucose levels to between 5 and 12 mmol/l. For some people the tablets do not bring the blood glucose levels down and your doctor may decide to start you on some insulin. You will be shown how to do this by either your practice nurse or a diabetes specialist nurse who will also tell you how much insulin to have.
- When your steroids are reduced or stopped it is important that your treatment is also reduced and in time stopped.
- Please ensure that you have a contact number for the nurse caring for your diabetes so you can phone for support.

# Will my blood glucose levels return to normal?

- When your steroids are reduced or stopped it is important that your diabetes treatment is also reduced.
- Your diabetes might go away when the steroids are stopped and you will be able to stop taking your tablets or insulin.
- Your diabetes may return if you need steroids again in the future and you may need treatment again.
- In some people the diabetes remains with them and your doctor will take a blood test from your vein to check if you still have diabetes. Please ensure you see your doctor/practice nurse to discuss the results.
- You are also at risk of developing diabetes over time even if you stop taking steroids. If you develop symptoms of unusual thirst, tiredness or needing to go to the toilet to pass urine more often, especially at night, then speak to your doctor about your concerns.