

Tayside
Diabetes
MCN

Information Pack for People Newly Diagnosed with Type 2 Diabetes

This information pack has been prepared to provide you with useful information following your diagnosis with Type 2 diabetes. It is for you to take home and read at a time and pace suitable to you.

Please keep it in a safe place and you can add to it with further information you may get in future and return to it when you want to refresh your knowledge.

It contains information on:

- What care you can expect when you are newly diagnosed
- What care you can expect on an ongoing basis
- What you need to do to help your diabetes
- Healthy eating
- Keeping fit and exercise
- Looking after your feet
- Diabetes and driving
- Tayside Diabetes Website and a list of other information leaflets you might find useful.
- Information about local support groups
- Diabetes Managed Clinical Network Leaflet – to register your name to be kept up to date with local diabetes news and events or become involved in improving diabetes services

This pack is to support information you receive from your doctor or nurse. If you have any questions or concerns about your diabetes you should speak to your doctor or nurse.

We hope you find it useful.

Tayside Diabetes Managed Clinical Network
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Tel 01831 660111 ext 33526, Email: elainewilson2@nhs.net
Website: www.diabetes-healthnet.ac.uk



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

What diabetes care should you have from your Practice?

For people newly diagnosed with Type 2 diabetes

It is likely that your GP and Practice Nurse will share responsibility with yourself for looking after your diabetes. Most people with Type 2 diabetes do not need to be referred to see a Hospital Consultant when they are newly diagnosed.

When you are first diagnosed your GP or Practice Nurse should:

- Explain to you what diabetes is and what this will mean for you.
- Offer you leaflets and material to take away and read at home.
- Offer to arrange for you to attend one or more special sessions near to where you live, within the next four weeks. Here you can spend time in a small group with healthcare professionals who will explain more about your diabetes. They will give you advice about how to look after yourself and your condition. This programme is called TDEP (Tayside Diabetes Education Programme) and your GP or nurse will be able to book you into a convenient session immediately. They will give you a letter with the details of time and venue to take away with you.
- Give you the details of the Tayside Diabetes website which contains more information about your condition and the services available to you
<http://www.diabetes-healthnet.ac.uk/>
- Discuss with you the importance of regular exercise, a healthy diet, including weight loss if you are overweight and stopping smoking, if you smoke.
- Explain to you the importance of attending the Practice for regular diabetes check-ups every 3 – 6 months and how these are arranged in the

Practice.

- Tell you who in the Practice to contact if you have concerns or questions about your diabetes.
- Check your height, weight, blood pressure, feet, urine and some more blood tests.
- Explain that, within the next 3 months, you will receive an appointment by post to attend the hospital or a special van in the community for Diabetes Eye Screening. At this appointment photographs will be taken of the back of your eyes. This is how we check that you are not developing problems caused by diabetes that might affect your vision if not discovered. This will be offered to you every year and is very important.
- Give you a prescription for 'diastix' and show you how to test your own urine for glucose (sugar) with these.
- Discuss whether you would benefit from starting to take a mini-aspirin tablet and a 'statin' tablet every day. These both work to help protect you from the complications of diabetes. They may also recommend that you commence tablets to improve your blood pressure or glucose levels.

Other leaflets you may find useful which are available on the Diabetes Managed Clinical Network website at www.diabetes-healthnet.ac.uk include:

- What diabetes care should you have from your Practice? – Ongoing care for people with type 2 diabetes
- Self Care: What can I do to help my diabetes?



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

What diabetes care should you have from your Practice?

Ongoing care for people with Type 2 diabetes

It is likely that your GP and Practice Nurse will share responsibility with yourself for looking after your diabetes. Most people with Type 2 diabetes do not need to be referred to see a Hospital Consultant for their routine ongoing care.

As part of your ongoing care you should be offered:

- Regular check-ups every 3 – 6 months when the doctor or Practice Nurse will review your diabetes. This will include measuring your weight, blood pressure, urine for protein and microalbumin which helps to check that your kidneys are working well. Also blood tests for your long-term sugar control (HbA1c), cholesterol and kidney function (creatinine and eGFR). They should also check how you are feeling in your mood and how you are getting on with looking after your own diabetes.
- Appropriate advice and medication to keep your sugar, blood pressure and cholesterol under good control.
- A formal check of your feet during at least one of these check-ups each year, including checking the pulses and feeling in your feet. The doctor or nurse should then calculate whether or not you are at increased risk of developing a foot ulcer in the future.
- Referral to a podiatrist, either in the community or at the hospital, if you are at any increased risk of developing a foot ulcer or if you are having difficulty in caring for your own feet.
- The opportunity to discuss the results of all your tests and, if you wish, to agree personal 'goals' for improvement over the coming months.
- A printed summary of your results to take away from your check-up,

including a summary of any agreed 'goals'.

- Referral to see a diabetes specialist (doctor or nurse) if your diabetes becomes difficult to control or if you develop complications or problems with your diabetes.
- Once a year (unless you are attending the Hospital Eye Clinic because of eye problems relating to your diabetes) you should receive an appointment by post to attend the hospital or a special van in the community for Diabetic Eye Screening. At this appointment, photographs will be taken of the back of your eyes. This is how we check that you are not developing problems caused by diabetes that might affect your vision if not discovered. It is a very important part of your care.

Other leaflets you may find useful which are available on the Diabetes Managed Clinical Network website at www.diabetes-healthnet.ac.uk include:

- What diabetes care should you have from your Practice? – For people newly diagnosed with type 2 diabetes
- Self Care: What can I do to help my diabetes?



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

Self Care for people with Type 2 Diabetes

What can I do to help my diabetes?

It is likely that your GP and Practice Nurse will share responsibility with yourself for looking after your diabetes. Most people with Type 2 diabetes do not need to be referred to see a Hospital Consultant for their routine ongoing care.

The most important part of your diabetes care is how you look after your own condition. You should:

- Take regular exercise, eat a healthy diet, loose weight if you are overweight and stop smoking if you smoke. Your Practice Nurse will be able to give you advice about how go about these things.
- Take all your prescribed medication regularly and discuss with your GP any concerns or problems you are having with your medication.
- Check your sugar control regularly, as advised by your GP or Nurse. Usually this is done by testing your urine for glucose with 'diasticks' which you can get on prescription. If you are requiring insulin injections to control your sugar or in some other circumstances where the doctor or nurse is concerned about your sugar control, you may be advised to check your own blood sugar readings at home. If this is the case, you will be given a meter and sticks to do this. You should know when and how to seek help if your sugar readings become unusually high.
- Look after your feet carefully and seek help if you develop corns, callous ulcers, foot infection or any other problems.
- Attend all your appointments and re-arrange these if you are going to be unable to attend one that has been arranged.

- Know who in the Practice to contact if you have concerns or questions about your diabetes.
- Know the address of the Tayside Diabetes website which contains more information about your condition and the services available to you <http://www.diabetes-healthnet.ac.uk/> .
- Ensure that you apply for free prescriptions if you are requiring medication to control your sugar levels.
- If you drive, inform your Insurance Company if you commence insulin treatment.

Other leaflets you may find useful which are available on the Diabetes Managed Clinical Network website www.diabetes-healthnet.ac.uk include:

- What diabetes care should you have from your Practice? – For people newly diagnosed with Type 2 diabetes
- What diabetes care should you have from your Practice? – Ongoing care for people with Type 2 diabetes



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

Healthy Eating and Your Diabetes

Healthy eating is important if you have diabetes because some of the foods that you eat will affect your blood glucose (sugar) levels. The rest of your family can join you in healthy eating too!

What is healthy eating?

1. Eat regularly

- Have 3 main meals a day i.e. breakfast, lunch and evening meal

2. Eat less sugar

- Sugar and foods containing sugar can cause the blood glucose to rise suddenly.
- It is best to replace these with **low sugar** and **sugar free** foods.

Foods high in sugar	Foods low in sugar/sugar free
Sugar, glucose, glucose syrup, dextrose, sucrose, icing sugar	Artificial sweeteners, e.g. Canderel Sweetex, Hermaseta
Sweet squash and fizzy drinks - e.g. Ribena, Lucozade Drinking Chocolate	Diet and low calorie, sugar-free squash and fizzy drinks - e.g. Robinsons Special R, Diet Coke, Pepsi Max tea, coffee, cocoa or low calorie chocolate drinks
All sweets, e.g. Chocolate, toffee, fudge, tablet, mints, chocolate covered and cream filled biscuits, marzipan	Fruit Plain biscuits or scone Sugar-free chewing gum
Sugar-coated or honey coated breakfast cereal, e.g. Frosties, Sugar Puffs	Unsweetened breakfast cereal e.g. porridge, Weetabix, Branflakes, Cornflakes, Rice Krispies

Continued over the page/

Foods high in sugar	Foods low in sugar/sugar free
Sweet pudding e.g. crumble, tarts, tinned fruit in syrup	Fresh or dried fruit Diet yoghurt, sugar-free jelly Tinned fruit in natural juice
Marmalade, jam, honey, syrup	Reduced sugar marmalade, jam

Providing your day-to-day eating is healthy, the occasional celebration meal will do no harm. If you are going to have something sugary, it is best to have it just after a high fibre meal.

3. Fill up on fibre and starchy (carbohydrate) foods

- Starchy foods include whole grain breakfast cereals, potatoes, rice, pasta, chapattis and whole grain bread.
- Make these foods the main part of every meal
- Add lentils, beans, split peas or broth mix to home-made soups and stews.

4. Cut down on fried and fatty foods

- Eat less butter, margarine, oil, lard, dripping, cheese and fatty meats
- Choose low fat dairy products e.g., skimmed or semi-skimmed milk, low fat spreads or cheeses instead of the full fat versions.
- Remember low fat products still contain a lot of fat so don't be tempted to use twice as much!
- Cut fat off meat, take skin off chicken and have smaller helpings of meat, fish, eggs and cheese.
- Watch out for hidden fat - eat fewer pies, sausage rolls, cakes, crisps and biscuits
- Grill, poach, boil, microwave or oven bake food instead of frying.
- If you need to use oil in cooking, measure it out so as to use less. Go for 'unsaturated' oils such as olive oil, sunflower oil or corn oil.

5. Eat plenty of fruit and vegetables

- Aim to eat 2-3 servings of fruit each day
- Buy fresh fruit or fruit tinned in natural juice
- All fruit is good for you including bananas and small quantities of grapes or dried fruit
- Try to eat at least 2-3 servings of vegetables and/or salad every day
- Use fresh, frozen or tinned vegetables

6. Eat less salt

- Cut down salt gradually so that you can get used to the taste change. Adding herbs and spices instead can help.
- Use as little salt as possible in cooking. Try not to add more salt to your meal at the table.
- Cut down on processed foods such as tinned and packet foods, salty meats, crisps and salted nuts.

Diabetic Foods

You can buy all the foods that you need from ordinary shops and supermarkets. There is no need to buy special "diabetic" foods. They can have a laxative effect and will not help if you are trying to lose weight.

Healthy Eating for Your Diabetes

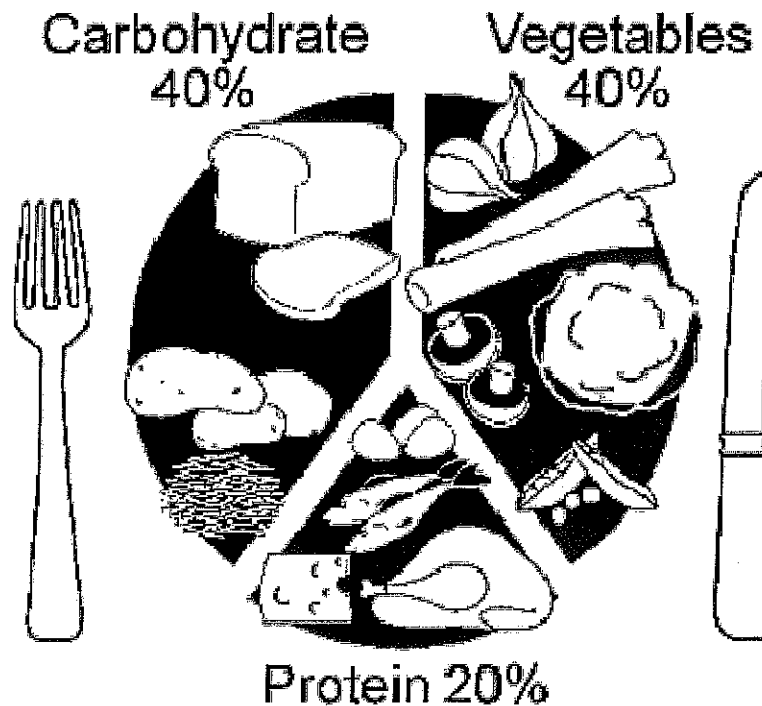
- Eat regularly i.e. three meals a day (breakfast, lunch & evening meal).
- Fill up on bread, potatoes, cereals, rice, pasta or chapattis at every meal.
- Aim to reduce your sugar intake.
- Cut down on fat and fatty foods.
- Eat plenty of fruit and vegetables - at least five portions a day.
- Cut down on your salt intake.
- Drink alcohol in moderation only – read the Patient Information Leaflet on Diabetes and Alcohol

Helping Sizes

	Household Measure	Cooked Weight oz/g
Meat	2-3 slices	2-3oz/ 50-75g
White fish	1 medium/large fillet	4-6oz/ 100-150g
Oily fish	1 small fillet 1 small can tuna	3-4oz/ 75-100g
Poultry (chicken)	2-3 small slices	3-4oz/ 75-100g
Egg	1-2 small/medium size	
Cheese (preferably low fat)	Small chunk matchbox size	1-1.5oz/ 25-35g
Pulses (e.g. baked beans)	Small tin	8oz/ 225g
Milk (skimmed or semi-skimmed)	1/2 - 1 pint per day	1/4 - 1/2 litre

Sample Menu

Does your plate look like this?



REMEMBER

Enjoy the food that you eat.

A healthy diet is the most important part of your diabetes treatment.

If you have any questions about your diet, ask your doctor to refer you to a dietitian.

This information has been produced by the Tayside Dietitians Consortium

Further Dietary Information

Diabetes UK provides a variety of cookery books and other information for people with diabetes. Contact Diabetes UK at 10 Parkway, London, NW1 7AA. Tel. 020 7424 1020, Fax. 020 7424 1001 Or on their website at www.diabetes.org.uk



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

Exercise and Your Diabetes

Exercise helps improve both your general health and your diabetes control.

Exercise can:

- Make you feel good
- Help you to control your weight
- Improve your circulation
- Lower your blood sugar

Improving health may help you:

- manage the stresses and strains of life
- control your risk of heart disease
- prevent brittle bones (osteoporosis) in later life
- reduce the risk of some cancers e.g. cancer of the colon (according to the Health Education Authority)
- keep you mobile and independent in later life

You can get all of these benefits from gentle, moderate or strenuous exercise.

How Much Exercise Should I Do?

- 30 minutes of moderate physical activity on five or more days of the week can improve health.
- If you are new to exercise then think of this as a target level and build up to it gradually.
- **Moderate** means enough to raise your heartbeat and make you feel warm and slightly - not uncomfortably - out of breath.
- **Physical activity** can include gardening, brisk walking, cycling, swimming and dancing as well as playing sports.

How to Get Started? : Questions to Ask Yourself

- Can I include more activity regularly in my everyday life?
- Can I use stairs rather than lifts, walk a couple of bus stops or park further away from work or the shops?
- How can I vary my activity so that I don't get bored?

- What time of day is best? Pick a time when your energy levels are highest.
- How long will my activity last and how energetic will I be?

You may need to be examined by a doctor before taking up strenuous exercise.

Exercise, Glucose and Insulin

Depending on the type of exercise you do, you may need to lower your insulin dose (if you take insulin to treat your diabetes) and/or increase the food you eat to avoid low blood sugars (hypos).

- Gentle activity may not affect your blood sugar levels
- For short strenuous exercise (e.g. squash), you may need more food beforehand and extra food afterwards at your next snack or main meal
- For prolonged exercise (e.g. a long cycle ride, football or rugby match), you may need to take extra food before, during and after your activity
- After exercise: your muscles will take at least 1-2 hours to refuel. During this time your blood sugar may still drop so it is important to check your blood sugar levels some hours after exercise to prevent delayed hypos, which may occur in the night .

Remember that everyone is different and there will be some trial and error involved in working out how to balance your diabetes with your exercise. Your diabetes nurse can help you work out a system that suits you. **Don't stop your insulin.**

Things to Remember if You Take Insulin

- You must do regular blood sugar tests to check the balance between your activity, insulin and snacks
- Ask your diabetes nurse for advice about reducing your insulin dose before planned exercise
- Make sure that you have some sugar, glucose tablets, chocolate or a sugary drink handy while you exercise (perhaps in your pocket)
- You may need to eat extra food before and after exercise
- You may also need to reduce insulin doses later in the day if you have been doing very strenuous exercise e.g. hill-walking for several hours
- The absorption rate of your insulin may be different with exercise; this depends on type of exercise and where you usually inject your insulin.
- The national controlling bodies of some sports (e.g. solo sailing, hang gliding, some forms of motor sport) do not allow people taking insulin to participate. These restrictions do vary so ask Diabetes UK for up to date advice (Diabetes UK Careline is 0845 1202960).



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

Diabetes and Driving

Having diabetes, however it is treated, does not prevent you driving a car or a motorbike. As long as your diabetes is well controlled, and your doctor says that you are safe to drive, there is no reason why you cannot be issued with, or retain a driving licence. You need to let your insurance company know, and you may also need to inform the Driving and Vehicle licence Agency (DVLA). This leaflet is designed to guide you on your legal requirements and provide you with all the knowledge that you need to drive safely.

Who do I need to inform?

1. No matter how your diabetes is treated, you must by law inform your insurance company that you have diabetes.
2. If your diabetes is treated with Insulin or tablets you must inform the DVLA.
3. If your diabetes is treated with tablets or Insulin and you are applying for a driving licence for the first time you must also inform the DVLA.
4. You must inform the DVLA if any diabetes complications develop that may affect your ability to drive safely.

If you fail to inform the DVLA or your insurance company then your driving insurance will be invalid.

You do not need to tell the DVLA if you are treated by diet alone. However, if you start to take tablets, or change from tablets to insulin treatment, then you must inform them.

Telling the DVLA

- If you are applying for licence, answer YES to the question if you have diabetes.
- If you already hold a driving licence, write a letter to the DVLA telling them about your diabetes and how it is treated. If you are treated with insulin, you will be sent another form (Diabetic 1) asking for more information. This includes the name and address of your General Practitioner or hospital doctor. They will also ask for your

consent to approach these people directly, if necessary, to obtain information on your fitness to drive. This does not mean that you will be refused a licence.

- If your diabetes is treated with Insulin, a driving licence will be issued for one, two or three years, and will allow you to drive a vehicle up to 3.5 tonnes. When this licence expires you will receive a reminder to renew the licence. You may also be sent another Diabetic 1 form to complete with more up-to-date information. Renewals are free of charge.
- If your diabetes is treated with tablets, you are not always sent the Diabetic 1 form. In general, you will be issued with a full driving licence, providing that you do not have any other medical condition which might prevent this. There is a charge for renewing this licence after the age of 70. This is the same as for anyone else in the UK who does not have diabetes.

Driving Safely

You should not drive if you;

- Have difficulty recognising the early signs of hypoglycaemia.
- Have problems with your eyesight, which are not corrected with glasses.
- Have numbness or weakness in your limbs.
- **Have been drinking alcohol.**

If you are unsure about any of these you can talk to your diabetes team.

Try to avoid low blood sugars while driving by:

- Always carrying carbohydrate (sugary) food in your car.
- Not driving for more than 2 hours without eating a snack.
- Not missing, or delaying, a meal or snack.
- Checking your blood sugar levels before and during your car journey.
- Carrying identification both on yourself and in your car - you should identify that you have diabetes and how it is treated.

IF YOU FEEL A HYPO WHEN DRIVING

- STOP driving as soon as it is safe to do so
- Remove the ignition key and move into the passenger seat. This is to avoid any suggestion that you may be "under the influence of drugs" whilst in charge of a car.
- IMMEDIATELY take glucose tablets, a sugary drink or sweets.
- Follow this by taking a longer acting carbohydrate e.g. biscuits or crisps.
- Check your blood sugar.
- Do not resume driving for 40 minutes after blood sugar is above 4mmols

If you have an accident whilst you are hypoglycaemic, you should get legal advice and the support of your diabetes care team. You should also contact Diabetes UK for further help and advice.

Driving For Your Work

- Local councils issue licences for taxis and minicabs. Their policies may vary throughout the UK and it is best to check with individual councils for further information.
- If your diabetes is treated with diet or diet and tablets, you may hold a licence to drive either a large good vehicle (LGV) or a passenger-carrying vehicle (PCV). If your diabetes is treated with Insulin, you will be unable to hold either and LGV or a PCV licence. If your diabetes is treated with Insulin, you will automatically lose the entitlement to drive vehicles within the C1/C1+E class. This includes vehicles between 3.5 and 7.5 tonnes with a trailer, up to a combined weight of 8.25 tonnes. However, you may apply to be assessed individually for fitness to drive these vehicles. If you are new to Insulin you will not be able to make this application until your diabetes has been stabilised for one month.

The Government has committed to undertaking a research programme which will examine the risks of driving and diabetes. This will take 2-3 years to complete and may result in changes to the current legislation.

Applying for a C1/C1+E Licence

In order to apply for this licence, you must ensure that you meet the following qualifying conditions:

- No episodes of hypoglycaemia which have required assistance whilst driving within the last 12 months. You must undertake to regularly monitor your blood sugar levels at least twice a day and at times relevant to your driving. If your application is successful, then you will need to continue to monitor in this way, particularly at times relevant to driving C1/C1+E vehicles.
- Every 12 months, you will need to arrange to be examined by a hospital consultant who specialises in diabetes. At the time of this examination, the consultant will need to review your blood glucose records for the previous 3-month period.
- You must have no other medical condition which would bar you from driving these vehicles.

If you are unsure whether or not you are able to apply for this licence, contact the DVLA directly (tel: 0870 6000301)

Application Pack for C1/C1+E Licence

The pack contains:

- Forms D1, D750 and DIABC1, which you will need to complete.
- Form D4. You will need to ask a doctor to complete this. This is needed at the first application for the licence and at 5-yearly intervals from the age of 45 until the age of 65, but thereafter it is required annually.

Once the DVLA are happy with the application, a medical questionnaire (C1 exam) will be sent, and this must be completed by a consultant specialising in diabetes. You will have to pay any consultation fee charged for this examination. If this report is not satisfactory, your ordinary (category B) driving licence will be re-issued for a 1-year period with C1 entitlement. You will also be asked to arrange, and pay for, the completion of a medical questionnaire by a consultant specialising in diabetes, with each licence renewal.

Driving Insurance

- For your car insurance to be valid, you must inform your insurance company as soon as you develop diabetes. This is required whether your diabetes is controlled by diet, tables or insulin.
- Some companies may refuse cover, impose special terms or charge an increased premium if their statistics show that drivers with diabetes are at higher risk. If this happens, it is worth challenging

your insurer, especially if your diabetes is stable and well controlled. It is always worth shopping around for quotes from a number of insurers, as there can be a big difference in premiums.

- Diabetes UK services have a motor insurance quote line on freephone 0800 7317432. Although these insurers are very sympathetic to people with diabetes, they cannot be guaranteed to be the cheapest in every case.
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For further information:

Diabetes UK: tel: 0207 6366112 www.diabetes.org.uk

DVLA: tel: 0870 2400009

For Medical Enquiries: Tel: 0870 6000301

www.dvla.gov.uk



NHS Tayside Diabetes Managed Clinical Network Patient Information Leaflet

Foot Care for People with Diabetes

Diabetes can have an effect on the blood and nerve supply, which can lead to complications in the leg and foot. This can slow down the healing process in the body and reduce the sensation to pain, temperature and pressure. Not everyone will develop these problems, but ALL people with diabetes should follow the same rules of foot care to prevent problems developing.

Maintaining good blood sugar and weight control is very important, as is avoiding smoking.

LOOK AT YOUR FEET DAILY

Your Diabetes Team will advise if you need to see a Podiatrist.

Inspect Your Feet Daily

- Look especially in between your toes and around your heels
- If you cannot manage to bend, ask a friend or relative to help, or put a mirror on the ground.
- Be aware of any cuts or anything unusual.
- Tell your Diabetes team or Podiatrist about any changes in your feet.

Inspect Your Footwear

- Are they the correct size/width/depth?
- Are there any rough seams or small objects caught in the shoe?
- Do these shoes still have the same support
- Are the soles still thick enough to protect your feet?

Pay Attention to Hygiene

- Wash feet daily with warm water and mild toilet soap.
- Dry thoroughly, especially in between your toes. Separate toes carefully.
- Use only a light dusting of talcum powder.
- Change hosiery daily

Look After Dry Skin

- Apply a moisturising cream after washing to help keep skin supple and avoid cracking, but take care not to put cream between your toes.
- Avoid using corn or hard skin remedies

Look Out For Moist Skin

- This is found mostly in between the toes and may lead to 'Athlete's Foot'.
- If athlete's foot occurs, ask the chemist or your GP for advice on how to treat.

Nail Care

- Only attempt to cut your nails if you are advised to do so and can see and reach your feet quite easily. Trim nails straight across, not too short, and file any rough edges.
- If you are unsure or have any difficulties, contact your Podiatry Department.
- **Never poke down the edges or try to cure in-grown toenails yourself.**

Dealing with Cuts

- Breaks in the skin should be bathed in warm water and a very dilute antiseptic solution. Cover with a dry sterile dressing.
- If there is swelling, redness, throbbing pain or pus, consult your Podiatrist, GP, Practice Nurse or Diabetes Clinic immediately.
- **Do not burst blisters but seek help.**

Footwear

- Forget about fashion!
- Always ask for your feet to be measured.
- Wear a well fitting shoe, with soft uppers, lace ups preferably.
- Always watch the depth and width and allow plenty room for your toes.
- Watch the seams around the shoes; they may rub your toes and allow corns to develop.
- Slippers should be worn for short periods only. They give no support or protection.
- If you have any loss of sensation in your feet, try to avoid sandals as they provide no protection.
- Do not wear garters and make sure socks and stockings are big enough, especially bed socks.
- Always look inside your shoes before putting them on to check that the seams are even and that nothing has fallen inside.

Preventing Ulcers

- Diabetes can affect the nerves to your feet causing numbness and loss of pain sensation. This means that you may be unaware of an injury or an ulcer forming.
- You may also have a change in the shape of your feet which means that you are much more likely to develop blisters or ulcers.
- Good control of your diabetes can help prevent ulcers.
- If you have had a previous ulcer or have problems with the nerves or blood supply to your feet, your Diabetes Team may advise you to see a State Registered Podiatrist.
- If you develop any ulcers, cuts, blisters or ingrown toenails, contact your nurse, GP or Podiatrist immediately.

DO NOT

- **Use a razor or any corn remedies on your feet.**
- **Wear poorly fitting shoes**
- **Go barefoot**
- **Sit too near heaters or use a hot water bottle to heat your feet up quickly.**

DO

- **Add cold water to the bath first, then hot water.**
- **Check the temperature of the water with your elbow before bathing your feet.**
- **Switch off electric blankets and remove hot water bottles before going to bed.**
- **Follow all of this advice and get your feet checked at least annually.**

Holiday Foot Care

Going on holiday can cause foot problems, so follow these simple precautions to ensure a trouble-free time.

The Journey

Long journeys on trains, buses and planes can make your feet swell. Walk up and down the aisle every half hour - the exercise will help keep the swelling down. Make sure your shoes don't become too tight.

Footwear

If you normally wear hospital supplied shoes, then wear them on holiday too. Remember that changing over to ordinary shoes could cause an ulcer - and ruin your holiday.

Avoid walking barefoot. On the beach, and in the sea, wear plastic sandals.

Sunburn

Avoid sunburn to your feet and legs. Use a sun screen with a high protection factor - or keep covered.

Foot Care

If your skin gets very dry in the hot weather, you may need to apply more moisturising cream than usual. Pay special attention to your heels - dry skin here cracks easily.

First Aid

Take small sterile dressings, antiseptic and adhesive tape on holiday. Clean any small blisters, cuts or grazes thoroughly then apply a sterile dressing.

Foot Check

Examine your feet daily for sores, swelling and colour changes. If any of these problems develop, then visit the local state registered podiatrist or doctor. Remember: delays in seeking treatment may make foot problems worse. Seek early treatment for all holiday foot problems.

Tayside Diabetes Website

www.diabetes-healthnet.ac.uk

NHS Tayside Diabetes MCN

Home page Login

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Welcome to the website of NHS Tayside's Diabetes Managed Clinical Network (MCN)

The MCN is a coordinated network of professionals involved in providing diabetes care across the region. Within this network patients and professionals work together to continually develop and improve this care. This website provides local information about diabetes and diabetes care for both healthcare professionals and patients. We hope you find the site useful and would appreciate feedback on any aspect of the site or the information provided. Please send your comments to: [Faihe Wilson](#)

SCIDC
Secure clinical information for diabetes care

TDEP
(Tayside Patient Education Programme) Group education sessions for people newly diagnosed with Type 2 diabetes.

Meet the Team
Team members of the Tayside Diabetes Clinical Network.

Handbook
Guidelines for diabetes care.

Specialist Clinics
Specialist Diabetes Clinics across Tayside

Patient Information
Information for patients including patient leaflets, events, groups.

Children's Services
Services and guidelines for children

Professional Education
Information about educational opportunities, conferences, locality forums.

Eye Screening
Details of the Retinopathy screening programme

MCN
Managed Clinical Network Documents including strategy, annual reports.

Enhanced Service
Information on Local Enhanced Service for Diabetes.

Latest News
Latest Tayside Diabetes news and events.

Research
Diabetes research in Tayside.

Links
Diabetes Web Links

Search this Website
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NHS Tayside **UNIVERSITY OF DUNDEE**

Latest News...
2nd Patient and Carer Conference Planned

This official Website is designed to help patients with diabetes and their carers to keep up to date with the latest support and information about Diabetes Care in Tayside.

The Diabetes Handbook, contains locally agreed protocols and evidence-based guidelines for the management of all aspects of diabetes, and is used by Healthcare Professionals throughout Tayside.

A wide range of regularly updated Patient Information Leaflets are available, to read on-line or to download and print off. These guarantee to provide you with accurate and consistent advice. Leaflets available are:

Introduction to Diabetes

Your Guide to Diabetes
Your Guide to Type 2 Diabetes
Gestational Diabetes

Your Guide to Type 1 Diabetes
Impaired Glucose Tolerance

Looking After Yourself and Your Treatment

What care to expect for people newly diagnosed with Type 2 diabetes
What can I do to help my Type 2 diabetes
Healthy Eating for Diabetes
Diabetes and Alcohol
Diabetes and Looking After Your Feet
Diabetes and Looking After Your Eyes
Diabetes and High Blood Pressure
Adjustment of Insulin
Having a Hypo

What ongoing care to expect for people with Type 2 Diabetes
What happens at a Diabetes Clinic
Diabetes and Exercise
Diabetes and Smoking
Looking After Your Diabetic Foot Ulcer
Diabetes and Cholesterol
Guide to Glucose Monitoring
Insulin Adjustment Basal Bolus with pictures

If You Feel Ill

Sick Day Rules for Patients with Type 2 diabetes on Tablets
Sick Day Rules for Patients with Type 1 Diabetes

Sick Day Rules for Patients with Type 2 Diabetes on Insulin

Living with Diabetes

Diabetes, Family Planning and Pregnancy
Diabetes and Driving
Diabetes and Travel

Diabetes and Erectile Dysfunction
Diabetes and Employment

Complications

Neuropathy

Diabetes and Heart Attacks

Other languages

Diabetes UK – Range of leaflets in Arabic, Bengali, Chinese, Gujarati, Hindi, Punjabi, Somali, Urdu and Welsh
NHS Direct Leaflet on Diabetes in Polish

Other Information

Diabetes Clinical Network Internet site

The website also contains information about patient events, local Diabetes UK patient support groups, Specialist Diabetes Clinics, Eye screening, the Children's Diabetes Service, latest diabetes related news, research activity and links to other approved diabetes-related websites.

Local Diabetes Support Groups

There are a range of local Diabetes UK support groups held throughout Tayside.

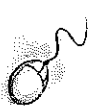
These groups offer people living with diabetes a chance to meet and share experiences with others. They are all run by volunteers and typically meet on a monthly basis often with a speaker on a topic like diet, exercise or research.

You do not have to be a member of Diabetes UK to attend these groups. However if you are interested in becoming a member, further information can be found on their website www.diabetes.org.uk or by calling 0845 123 2399 (office hours)

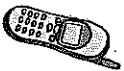
- | | | |
|----------------|----------|-------------------------------------------------------------------------------------------------------------------------|
| Dundee | When: | 2 nd Tuesday of the Month at 7.30pm |
| | Where: | Ninewells Hospital, Level 10 |
| | Contact: | Ian Morrison
Tel: 01382 826552 |
| Angus | When: | Last Wednesday of the Month at 7.30pm |
| | Where: | Salvation Army Hall, 45 Marketgate, Arbroath |
| | Contact: | Mary Law
Tel: 01241874451
Email: mollybear@hotmail.co.uk |
| Perth | When: | Not on at moment – call contact below for further information or if interested |
| | Contact: | Vivian Mann
Tel: 01738 635826
Email: vivian@mann1352.fsnet.co.uk |
| Kinross | When: | 3 rd Saturday of the Month at 10.30 am |
| | Where: | Mill Bridge Hall, Kinross |
| | Contact: | Linda Craig
Tel: 01577 861217
Email: l.m.craig@tesco.net |

For more information please send in the tear off slip or contact:

Elaine Wilson
Diabetes Managed Clinical Network
NHS Tayside
Diabetes Support Unit
Level 8
Ninewells Hospital
Dundee DD1 9SY



elainewilson2@nhs.net



01382 660111 ext 33526

**We look forward to hearing
from you.**

You can find more information about
our work on our website

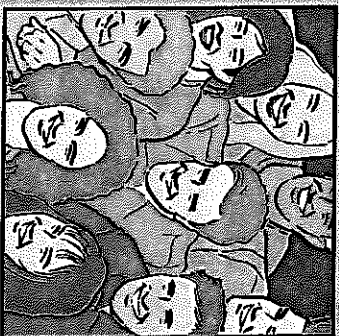


www.diabetes-healthnet.ac.uk

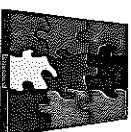
**Diabetes Managed
Clinical Network**

**Getting Involved
In Improving
Diabetes Care**

Patients and carers
making a difference



NHS
Tayside



Tayside
Diabetes
MCN

Is it for me?

Do you have diabetes or are you the carer of someone with diabetes? This is your chance to use your experiences both good and bad to benefit others. Getting involved in the Diabetes Managed Clinical Network means you can be heard and make a difference.

What is the Diabetes Managed Clinical Network?

The network is a group of healthcare professionals and patient representatives working to improve people's experience of diabetes care in Tayside. Our aim is to provide high quality services no matter where in Tayside you live.

How can I get involved?

There are a number of ways you can be involved in the network.

We need patient and carer representatives to:

- Be part of network meetings
- Review specific pieces of work
- To tell us your story of your experiences of diabetes care
- To be on mailing lists for newsletters or questionnaires about services.

What would I be asked to do?

You can choose to become as actively involved as you feel comfortable with or have the time to. You do not have to take up any project if you don't think it is right for you.

Alternatively you can just put your name on our mailing list and get information on events such as our annual patient and carer conference.

Simply share your experience

If you feel unable to get involved but would simply like to share your experience of diabetes services, we would also welcome this. Please write to the address, email or telephone the number overleaf.



I would like to know more about becoming involved in improving diabetes services or telling my story.

I would like to put my name on the mailing list for information about events.

Name: _____

Address: _____

Telephone: _____

Email: _____



Do you want to know more about diabetes?

Would you like to meet other people who also have diabetes or who care for someone with diabetes?

Every year the Tayside Diabetes Managed Clinical Network runs a Diabetes Patient and Carer Conference

What is it?

The event is open to anybody who has diabetes and their families/friends. It is led by specialist diabetes staff including, doctors, nurses, podiatrists and dietitians who provide lots of up to date information on topics with plenty of opportunities to ask questions. There is also time to meet and chat with other people who have diabetes or who look after someone with diabetes.

What can you learn?

Topics covered in past conferences include:

- What is diabetes
- Understanding medications
- Self Managing Type 1 Diabetes
- New Research and Treatments
- Health Eating
- Exercise
- Looking after your feet
- Diabetes Emergencies



What have others said?

People who have attended these conferences have found them very helpful. The majority reported that they

- found all the topics useful and informative
- had learnt something new
- would like to come back to future conferences.

Interested?

The next conference will be in 2009, a date has not yet been set.

If you would like to receive information about the conference when it is available contact Sandra Scott on Tel: 01382 660111 Extension 35698 or email:

alexandrascott@nhs.net and register your name and address.

Or go to our the Patient Information section in our website at www.diabetes-healthnet.ac.uk where information will be updated when available

