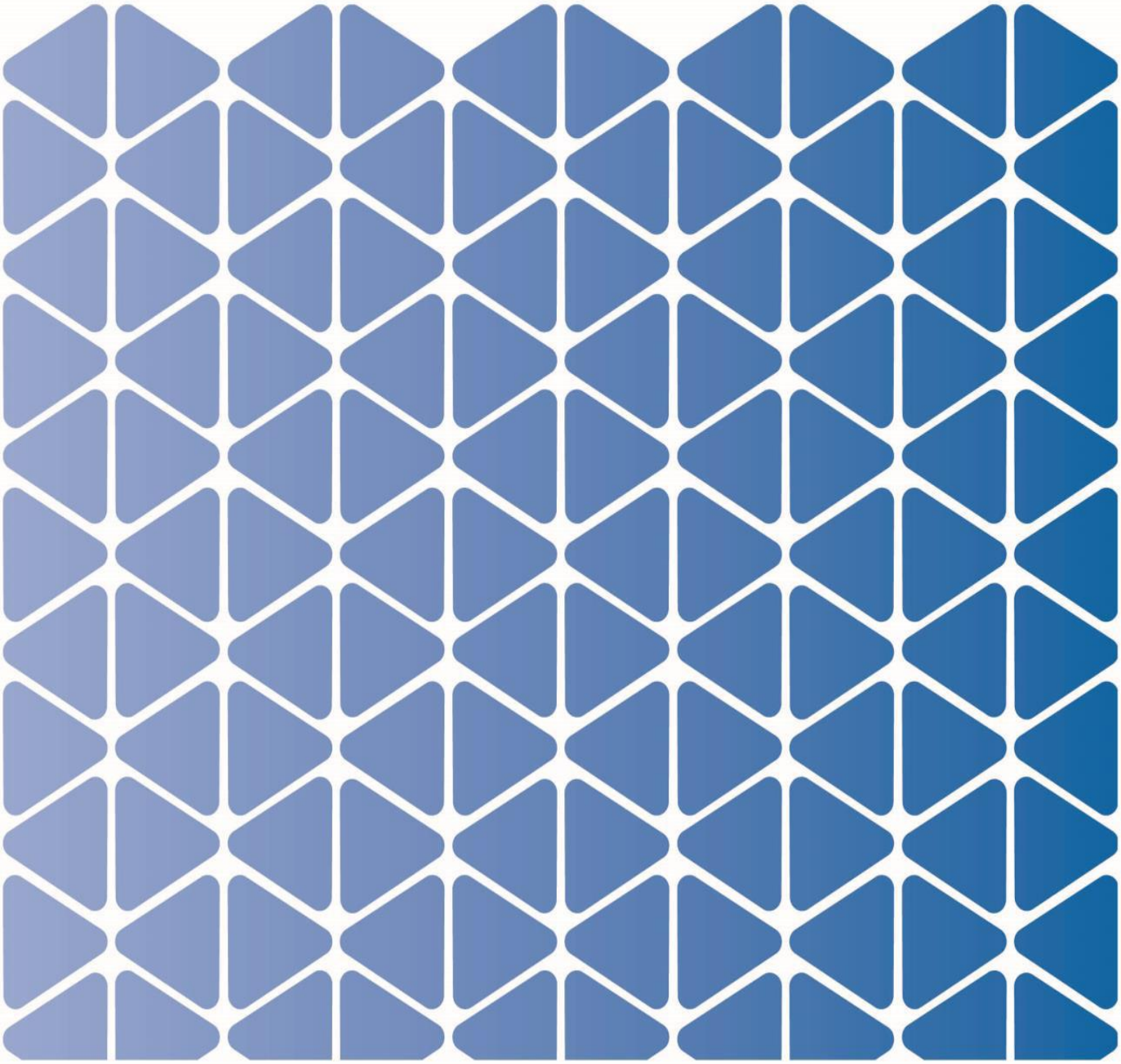
NHS
Worcestershire Acute Hospitals NHS Trust

PATIENT INFORMATION

Type 2 Diabetes in Children and Young People- Medical Management



Medical Management of Type 2 Diabetes in Children and Young People

In addition to lifestyle modifications including healthy eating and exercise, some children and young people need medication to help manage their Type 2 Diabetes. There are a number of medications that can be used, and these may be later stopped if they are no longer required.

Metformin

Metformin is the most commonly used medication in Type 2 Diabetes in children and is very safe. It is usually taken as a tablet, and the dose is increased gradually over 3-4 weeks. We will advise you on how to increase the dose. Metformin helps by reducing the amount of sugar or glucose the liver releases into your blood, and with insulin resistance so the insulin in your body works better. Metformin can also reduce your appetite and help you to lose weight.

Metformin can sometimes cause side effects including nausea, tummy ache and diarrhoea. These can be reduced by taking Metformin with food, and the side effects usually settle down over a few weeks as you get used to the medication. Sometimes Metformin can also give a metallic taste in your mouth, but again this will improve. If you are really struggling with side effects, then please talk to your diabetes team. Low blood glucose levels (hypoglycaemia) are not usually a problem with Metformin.

Important:

If you become unwell with an illness that could lead to dehydration such as vomiting and diarrhoea, or Diabetic Ketoacidosis (DKA), it is important that you temporarily discontinue Metformin. This is because you could develop lactic acidosis, a condition where lactic acid builds up in your blood, and this can make you very poorly. It is also important to temporarily stop Metformin if you need to have surgery. Please contact the Diabetes team for advice.

Insulin

If your blood glucose levels are very high when you are diagnosed with Type 2 Diabetes, or if they remain high despite other treatments, you may be started on insulin injections. The diabetes team will teach you how to give these and explain how much insulin you need. Insulin injections increase the risk of low blood glucose levels (hypoglycaemia) and therefore you will need to monitor your blood glucose levels more frequently.

GLP-1 Agonists

If lifestyle modifications and Metformin have not been effective at lowering your HbA1c to less that 48mmol/mol within 3 months of your diagnosis, we may introduce a second medication called a GLP-1 agonist. There are different GLP-1 agonists available, but the two we use most commonly are Dulaglutide and Liraglutide. These medications are given as injections, and the diabetes team can help teach you how to give these. The doses are usually started off small and increased over a few weeks.

GLP-1 agonists can sometimes cause side effects including nausea, vomiting and diarrhoea. These usually settle but it is important to stay hydrated by drinking plenty of fluids when taking GLP-1 agonists.

Important:

Rarely, GLP-1 agonists can increase your risk of developing pancreatitis or gall stones. Please let your diabetes team know if you have suffered with these conditions before. If you experience symptoms of pancreatitis including severe abdominal pain or nausea and vomiting, then it is important you seek urgent medical review.

GLP-1 agonists can sometimes increase your risk of low blood glucose levels (hypoglycaemia), particularly if you are using insulin as well. The diabetes team will teach you about recognising and treating low blood glucose levels.

Dapagliflozin

Dapagliflozin is a type of medication called an SGLT2 inhibitor. This is taken as a tablet once a day and is usually used if lifestyle modifications and other medications have not been effective.

Important:

Dapagliflozin can increase your risk of developing a condition called Diabetic Ketoacidosis (DKA), particularly if you are unwell. It is therefore important that you have blood glucose and ketone monitoring equipment available and that you check both of these levels if unwell. You should temporarily stop taking Dapagliflozin if unwell and speak to your diabetes team for advice. If you develop DKA you must stop Dapagliflozin immediately and seek urgent medical attention.

It is also important to maintain genital and perineal hygiene. If you develop any pain, redness or swelling to the genital area, along with fever and feeling unwell, then you must seek urgent medical review.

If you have any questions about the medications used in Type 2 Diabetes in children and young people then please speak to the diabetes team.

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.