

THE DOCS SURGERY

Sick Day Rules — Type 2 Diabetes

How to manage your diabetes medications when you are unwell

GENERAL ADVICE

Stay well hydrated • Check blood glucose more often • Contact GP or call 111 if unsure

■ **Seek URGENT help: persistent vomiting / unable to keep fluids down / blood glucose very high or low**

METFORMIN

e.g. Glucophage, Metformin SR

CONTINUE

Generally continue if eating, drinking and tolerating fluids normally.

STOP

Stop if vomiting, severe diarrhoea, unable to eat/drink, or feeling very unwell.

STOP

Also stop before surgery or procedures using contrast dye (e.g. CT scan with dye).

RESTART

Restart 48 hours after full recovery and eating/drinking normally.

WHY?

Risk of lactic acidosis if dehydrated. Illness can reduce kidney function.

SGLT2 INHIBITORS

e.g. Dapagliflozin • Empagliflozin • Canagliflozin

STOP NOW

Stop immediately if vomiting, diarrhoea, or cannot eat and drink.

DKA RISK

Risk of Diabetic Ketoacidosis (DKA) — even if blood glucose appears normal. Seek URGENT help.

SIGNS OF DKA

Nausea • Vomiting • Abdominal pain • Extreme thirst • Breathlessness • Confusion

RESTART

Only restart after 48 hours of full recovery. Check with GP if unsure.

GLICLAZIDE

Sulphonylurea — e.g. Gliclazide MR 30mg / 60mg

HIGH RISK

High risk of causing low blood sugar (hypoglycaemia) when unwell and not eating.

REDUCE/STOP

Reduce dose or stop if not eating normally. Contact your GP for dose advice.

MONITOR

Check blood glucose regularly. If below 4 mmol/L, follow your hypo treatment plan.

RESTART

Resume your normal dose once eating and drinking well again.

GLP-1 RECEPTOR AGONISTS

e.g. Semaglutide (Ozempic) • Liraglutide • Dulaglutide

OMIT DOSE

Skip your injection if vomiting or unable to tolerate food and fluids.

CONTINUE

Can continue if only mildly unwell and still able to eat and drink normally.

NOTE

GLP-1 agonists slow stomach emptying — this can worsen nausea when ill.

RESTART

Resume injections once recovered and tolerating food and drink normally.

DPP-4 INHIBITORS (Gliptins)

e.g. Sitagliptin (Januvia) • Alogliptin • Linagliptin (Trajenta) • Saxagliptin

GENERALLY SAFE

Usually safe to continue during illness. Low risk of hypoglycaemia when used alone.

CONSIDER STOP

Consider stopping if severely unwell, dehydrated, or not eating — especially if also on Metformin.

MONITOR

Monitor blood glucose. Seek advice if levels stay high or you feel very unwell.

RESTART

Resume your normal dose once you have fully recovered and are eating and drinking well.

■ CALL 999 OR GO TO A&E IF:

Persistent vomiting • Unable to keep fluids down • Blood glucose >20 mmol/L • Confusion • Breathlessness • Signs of DKA