TABLETS FOR DIABETES
You may have had difficulty controlling your blood glucose (sugar) simply by eating more healthily and increasing your level of exercise. The next step for many people is to start taking tablets to help lower blood glucose levels. There are lots of different types of tablets, and they suit people with different needs. Sometimes tablets to help lower blood glucose are referred to as oral antidiabetic drugs or oral hypoglycaemic agents.

Make sure your diabetes team is aware of all the medicines you take, as some may interfere with your diabetes tablets or cause side effects.

You may be given slow-release tablets which act in a gradual way in the body, or you might have to take a combination of tablets. Make sure you understand exactly how to take your tablets and what to expect from them. Keep a note in the space below.

<table>
<thead>
<tr>
<th>Your tablets are called:</th>
<th>Brand name:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Generic name:</td>
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<td>Type:</td>
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<table>
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<tr>
<th>You need to take them:</th>
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<tr>
<td>• Take care to take your tablets at the right times</td>
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<tr>
<td>• Don’t stop taking your tablets unless you have been asked to do so</td>
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**Your diabetes team**

A diabetes team is a group of healthcare professionals with specialist knowledge and experience of supporting people with diabetes. For example, teams may include diabetologist / endocrinologists (hospital specialists who deal with hormone disorders such as diabetes), family doctors, specialist diabetes nurses, dieticians, ophthalmologists (for specialist eye care) and podiatrists (for foot care).

You should have the right treatment for you, and it’s for this reason that you must stay in contact with your diabetes team and attend your appointments.
Your blood glucose levels

Keep a note of your target blood glucose in the space below:

Your fasting blood glucose should be: 

1-2 hours after food, your blood glucose should be: 

Why take tablets?

You’ve been prescribed tablets for your diabetes because healthy eating alone is not bringing your blood glucose levels near enough to normal. Don’t think that your diabetes is getting worse or you are doing something wrong because you now have to take tablets. It’s quite usual to have to take this next step; it just means your body needs a bit more help to control blood glucose.

But even though you’re taking tablets, don’t forget about healthy eating and exercise - it’s still important to do the basics.

Taking your tablets

Your diabetes team will advise you when to take your tablets - keep a note of this on the front page of this leaflet. Also, be aware of the general advice given in the box opposite. By taking your tablets correctly, you’ll be able to achieve better glucose control and reduce your risk of long-term problems.
If you are ill or miss a dose

- If you are ill do not stop taking your tablets
- If you are vomiting contact your diabetes team immediately
- If your dose is more than 1-2 hours late, miss it and take the next one at the normal time

Never double your dose because you’ve missed a tablet

If you have problems

As with all medication, diabetes tablets can have side-effects and can react with other medicines you’re taking. If you have unpleasant side-effects at any time, speak to your diabetes team. Also talk to your team if you find that your blood glucose is still higher than it should be.

A step further

As time progresses, so does diabetes. Don’t feel worried that you are starting on tablets, having to take different tablets, or that your dose needs to be increased - this is a normal part of your treatment.

Some people need to take more than one type of tablet to control their blood glucose (this is sometimes called combination treatment). Some may need to take insulin or tablets plus insulin. If your diabetes team recommends this as a next step for you, remember that needing tablets and/or insulin is a natural part of diabetes treatment.

If you have any concerns or questions about tablets, contact your diabetes team.
Different types of tablets

There are six main types of tablets for diabetes. These are described below.

The main types of diabetes tablets

- Sulphonylureas (sulf ON il yur ees), which work by increasing the amount of insulin made by your body.

- Metformin (MET for min), which improves your body’s response to insulin and also stops it making too much sugar. Metformin belongs to a group of medicines called the biguanides, but at present it is the only one available.

- Acarbose (a CAR bose), which slows down the speed at which starchy and sugary foods are absorbed into the body. The rise in blood glucose slows down after a meal as a result. Acarbose is an alpha-glucosidase inhibitor.

- Glitazones (GLIT a zones), which help the body use its own insulin more effectively.

- Prandial (PRAN dee al) glucose inhibitors, which help your body produce the right amount of insulin after meals to cope with the increase in glucose.

- Dipeptidyl peptidase 4 inhibitors (DPP4 inhibitors), otherwise known as gliptins, promote insulin release from the pancreas in the presence of food.

- Sodium Glucose Co Transporter2 inhibitors (SGLT-2 Inhibitors), reduce the amount of glucose being absorbed in the kidneys so that it is passed out in the urine.

Some of the tablets above are produced together, so there are two drugs within one tablet. These are known as ‘combination tablets’.
Other information

Other leaflets in this series include specific explanations of some of the terms used here. Leaflets on blood testing, hypos, travel, impact on sexual health, driving and employment, illness, and complications may be particularly helpful for you. Ask your diabetes team for the ones you want.

www.lillydiabetes.co.uk/patients

Further information is available from

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