



Patients with Diabetes taking Moviprep

For a Colonoscopy or Flexible Sigmoidoscopy



Diagnostic and Clinical Support - Endoscopy



This information is for:

- Patients with Type 2 diabetes treated with medication
- Patients with Type 1 or Type 2 diabetes treated with insulin

If you have any concerns about managing your diabetes while preparing for this investigation or about how the Moviprep may affect your diabetes, please contact the **Diabetes Specialist Nurses**:

Preston 01772 777621 or Chorley 01257 245350

Any patient treated with insulin must have a morning appointment at around 08:30. If this is not the case please contact the endoscopy unit.

Day before the procedure: Insulin therapy

Insulin doses will need to be reduced on the day before the investigation (except **Levemir**, **Lantus**, **Abasaglar**, **Toujeo** or **Tresiba**) as carbohydrate intake will be smaller in order for the bowel to be cleared.

You should not omit any insulin doses when taking the preparation, if you have any queries, please discuss with your **Diabetes Care Team: Preston 01772 777621 or Chorley 01257 245350**

Patients who are confident about adjusting their insulin dose according to their reduced carbohydrate intake, and also substituting carbohydrate in clear liquid form (i.e. lemonade, coke, Lucozade), should remember that frequent intake of small amounts (¼ to ½ a glass) is required.

GLP-1 agonists are non-insulin injectables and these include:

- Trulicity (Dulaglutide)
- Bydureon / Byetta (Exenetide)
- Victoza (Liraglutide)
- Lyxumia (Lixisenatide)
- Semaglutide (Ozempic)

If you take daily non-insulin injectable treatments - do not to take these until you are eating and drinking normally.

If you take weekly non-insulin injectable treatments - no changes needed.

Blood Glucose Testing: Insulin therapy

Since your carbohydrate intake is smaller than usual, there is a risk of hypoglycaemia. Therefore, blood glucose monitoring should be done at least every 2 – 4 hours. You can prevent hypoglycaemia by taking extra carbohydrate in the form of clear fluids if necessary. It is advisable to carry glucose tablets, in the event of hypoglycaemia.

Oral medication

Following administration of the first sachet of Moviprep, no more of the following diabetic medications should be taken for the rest of the day:

- Acarbose (Glucobay)
- Alogliptin
- Canagliflozin
- Dapagliflozin
- Empagliflozin
- Glibenclamide (Daonil or Euglocon)
- Glicazide of Glicazide MR (Diamicron or Diamicron MR)
- Glimepiride (Amaryl)
- Glipizide (Glibenese or Minodiab)
- Gliquidone (Glurenorm)
- Linagliptin
- Metformin (Glucophage or Glucophage SR)
- Pioglitazone (Actos)
- Repaglinide (NovoNorm) or Nateglinide (Starlix)

- Saxagliptin
- Semaglutide (oral preparation)
- Sitagliptin
- Tolbutamide
- Vildagliptin

Blood Glucose Testing: Oral medication

If you normally monitor your own blood glucose, it is advisable to check this 4-6 hourly through the day prior to the investigation and watch for hypoglycaemia or if you feel unwell. It is advisable to carry glucose tablets, in the event of hypoglycaemia.

Diet - please follow the diet according to the bowel prep information sheet:

- Follow instructions sent by the Endoscopy Unit
- Drink clear fluids freely: Oxo, Bovril, cordial, water or fizzy drinks as desired
- Once no solid food is allowed, sugar-containing drinks may be important to keeping the blood glucose from dropping too low
- Take these in small quantities and at regular intervals across the day and evening to keep the blood glucose stable
- If your blood glucose is below 4mmol:
 - have 1 bottle of Glucojuice/Lift Juice shots (15gm)
 - or 1-2 tubes of Glucoboost gel (10gm per tube)
 - or 200mls of Lucozade
 - or 3-5 glucose/Dextrose tablets

FOR ALL APPOINTMENT TIMES YOU MUST STOP DRINKING TWO HOURS BEFORE YOUR APPOINTMENT.

Day of Investigation: MORNING APPOINTMENT

- More regular monitoring of blood sugar will be necessary
- DO NOT EAT ANYTHING the morning of your appointment
- Test blood glucose on rising (if you normally do so).
 If it is below 4mmol:
 - have 1 bottle of Glucojuice/Lift Juice shots (15gm)
 - or 1-2 tubes of Glucoboost gel (10gm per tube)
 - or 200mls of Lucozade
 - or 3-5 glucose/Dextrose tablets
- DO NOT take any daily non-insulin injectables, insulin or oral medication on the morning of your test
- DO bring your insulin/diabetic tablets and some breakfast to the endoscopy unit so you can take these after your procedure is finished
- If you are on insulin therapy, it is advisable not to drive to the hospital
- On arrival, please remind the staff that you have diabetes
- Your blood sugar level will be recorded by staff before and after your procedure
- Please take your insulin and equipment with you to the appointment
- Check your blood glucose pre-meal for the rest of the day (if you normally self-test at home)

Day of Investigation: AFTERNOON & EVENING APPOINTMENT (oral medication only)

- More regular monitoring of blood sugar will be necessary
- Omit all morning diabetes tablets and non-insulin injectables
- Only drink clear fluids up to two hours before the procedure and do not eat anything
- Test blood glucose levels while oral intake is restricted.

- Take normal diabetes tablets with your evening meal (after the investigation is completed)
- If you normally self-test at home, if it is below 4mmol:
 - have 1 bottle of Glucojuice/Lift Juice shots (15gm)
 - or 1-2 tubes of Glucoboost gel (10gm per tube)
 - or 200mls of Lucozade or 3-5 glucose/Dextrose tablets
- Check blood glucose pre-meal for the rest of the day

Contact details

Should you require further advice or information please contact:

Endoscopy - Preston 01772 524958 (08:00 – 18:00 Monday – Friday)

Endoscopy - Chorley 01257 245649 (08:00 – 18:00 Monday – Friday)

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

www.gutscharity.org.uk

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

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Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

Gujarati:

આ માહિતીને સમજવામાં સહાયતા જોઇતી હોય તો કૃપા|કરીને પૂછો. આ માહિતી મોટા છપાણ માં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે

Romanian:

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi."

Polish:

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostepnić dużym drukiem oraz w innych jezykach

Punjabi:

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੱਚਿ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਹੰਟਿ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੱਚਿ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

Urdu:

دو سر ی زبانوں او ربڑ ی اگر آپ کو دی معلوسات سمجھنے کے بےل مدد یک ضرورت ہے تو یوکو سر ی کیا نہ ہو کہ علوسات کی چھوا کھی ویہ اب اب کست ہو کسکت ہے براغ مہر کیان ہو ے کچھوی معلوسات

Arabic:

مطبو عة بأحر ف كبير ة و بلغات إذا كنت تريد مساعدة في فهم هذه المعلومات يُر جي أن .تطبب مطبوعة بأخرى بمكن تو فير هذه المعلومات

Department: Endoscopy

Division: Diagnostics and Clinical Support

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