

Living with dementia and diabetes

Many people with dementia also have diabetes. They may need extra support to stay well, particularly with medications and testing blood sugar levels. In the UK, around one in seven people who are living with dementia also have diabetes.

What is diabetes?

Diabetes is when a person has lost the ability to keep the level of sugars in their blood down to a safe level.

There are two main types of diabetes:

- Type 1 diabetes is when the body can't make the hormone insulin because the immune system has destroyed the cells that make it. People with this type need to have an insulin injection after meals, or at least once a day.
- Type 2 diabetes is when insulin doesn't work as well as it should do to keep blood sugar levels at a safe level, or isn't able to be made in large enough amounts.

Most older people with diabetes have type 2 diabetes, although a small minority will have Type 1.

Recognising the symptoms of diabetes
Ideally, diabetes should be picked up before a person has symptoms. One of the benefits of a regular health check with a GP is that they can do a blood test which checks for signs of diabetes. This can help to catch the condition early, making it easier to manage and less likely to cause harm.

If diabetes isn't caught early, the first signs are likely to be when a person develops symptoms.



These can be difficult to spot as they could be mistaken for complications of dementia, or the effects of old age or frailty.

- peeing more than usual, particularly at night
- feeling thirsty all the time
- feeling very tired
- unexplained weight loss
- repeated infections, such as a urinary tract infection (UTI) or thrush
- cuts or wounds that take longer to heal
- blurred vision

Keeping a healthy lifestyle can be challenging

The recommended approach to managing mild diabetes is lifestyle change, such as eating a healthy diet and being physically active. While it's important to try to achieve these when possible, in practice it can be very challenging when someone has dementia.

A person with dementia may forget to eat, leading to a dangerous drop in blood sugar levels (a 'hypo') or they may eat too much having forgotten that they've already eaten.

They may develop a preference for very sweet and sugary foods, which can keep blood sugar levels high. Physical activity can also become more challenging over time.

This means that a person with dementia may be more reliant on medication to keep their blood sugar levels within a safe range.

Managing diabetes medication

There are several different types of diabetes medication, each working in a slightly different way.

Some diabetes medications may be harder to manage for a person with dementia than others – for example if they:

- need to be taken several times a day
- are very small and difficult to see or handle
- need specialist skills to administer, or need regular testing
- might lower blood glucose too far if accidentally taken twice.

It's important not to keep struggling with a medication regime that is becoming increasingly challenging. A medication review booked through the GP can help to make sure a person is taking the right medication for them, including ways to make it simple and easier.

Needing help with blood sugar and insulin injections

People who have either type 1 or severe type 2 diabetes may need to test their blood sugar levels regularly and have insulin injections at least once every day. For someone with dementia this can become very challenging, so often a partner or family carer will take on these tasks for them. If this isn't possible, they can often have daily insulin injections given by a district nurse.

Taking too much insulin can be dangerous so it's important to reduce the risk of double-dosing, which can happen if a person forgets that they've already had an injection. Some carers keep their insulin medicines in a locked cupboard or safe for this reason.

Technology can also help. For example, [smart injector pens](#) automatically record the time and dose of the last injection and

can show if a dose has been missed. This can be reassuring for a person with memory problems who is still managing their diabetes themselves.

Testing blood sugar levels can now be done painlessly with a [flash glucose monitor](#) that connects to an app on a smartphone or other device. This can make supporting a person with insulin-dependent diabetes much easier and safer. The devices can often be available through the NHS.

Not everyone who has type 2 diabetes needs to test their blood sugar levels regularly. It depends on what medications they are taking. A GP or diabetes nurse should be able to advise if this is needed.

Staying healthy with diabetes and dementia

Like dementia, diabetes is a progressive condition. This means that it becomes more challenging to manage over time.

Poorly controlled diabetes can lead to serious health complications, such as nerve damage, kidney problems, severe gum disease, worsening vision, heart attack and stroke.

It's really important to stay on top of the condition and get regular check ups from healthcare professionals. These may include:

- Diabetes specialist nurse – a regular point of contact who monitors the condition, provides practical advice, and refers to a specialist when needed.
- Clinical pharmacist – a specialist who can carry out medication reviews and help to make diabetes medications easier, safer and more effective. They can also arrange for medicines to be packaged into pre-prepared blister packs, which means that professional carers can help to administer them.
- Eye screening service – people with diabetes should have regular checks every 1 to 2 years for damage in the eye. This helps to prevent blindness.
- Podiatrist – a specialist in foot care who can prevent diabetes from causing ulcers, infections, or amputations. They can also cut toenails safely.

For more information on diabetes care, visit [Diabetes UK website](#) or call their helpline on 0345 123 2399.

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