

DIABETES MELLITUS, ALSO CALLED SUGAR DIABETES, is a metabolic disorder in which the body does not produce or properly use insulin, which is a hormone that breaks down sugars in the body.

Some people are more likely to develop diabetes than others, such as those who are obese, have a family history of diabetes, or have a mental-health disease. But what if you have diabetes and a mental-health problem? This module provides information about diabetes to people with schizophrenia, including the importance of **understanding diabetes and:**

- Schizophrenia
- Its symptoms
- Its diagnosis
- Its risks
- Its management.

Diabetes can be a silent disease, so many people may have diabetes years before they show any symptoms.

Diabetes can be effectively treated, but if left untreated, it can lead to further problems. It is therefore important to have your blood sugar levels tested regularly to ensure that you have not developed diabetes, and to prevent and reduce your risk of other problems.





DIABETES AND SCHIZOPHRENIA

People with schizophrenia may have an increased risk of developing diabetes, and for those who already have diabetes, having schizophrenia may worsen their diabetes. It is important that you inform all your healthcare providers if you have diabetes.

For patients who are taking or start taking **atypical antipsychotic drugs**, it is usual **for them to have a fasting blood sugar test at the beginning of treatment**, and then be **monitored regularly** during treatment to ensure good control of their **blood sugar levels** and their lipid levels.

Remember that you can make a big difference in reducing or preventing the damage that diabetes can have on your body – so the earlier you know you have diabetes, the sooner you can make these important lifestyle changes.





You and your diabetes team will develop a management plan that meets your own individual needs. Depending on your type of diabetes, it may be treated by diet and exercise only, or you may need tablets or insulin injections as well.

What are the symptoms of diabetes?

There are many different symptoms of diabetes, and not everyone with the disease will experience all symptoms. Some of them include:

- Going to the toilet to pass urine frequently
- Having excessive thirst
- Being tired more easily
- Losing an unusual amount of weight
- Being irritable
- Having blurred vision
- Having cuts and wounds that heal slowly.

WHAT ARE THE RISK FACTORS FOR DIABETES?

The major risk factors for diabetes includes:

- Age – the risk of diabetes increases with age, particularly after 35 years
- Being overweight or obese
- A family history of diabetes
- Physical inactivity
- If you have had diabetes during pregnancy.

How is diabetes diagnosed?

In diagnosing diabetes, doctors usually rely on the results of specific sugar tests. However, test results are just part of the information that goes into the diagnosis of diabetes. Your physical health, presence or absence of symptoms, and medical history may also be considered. Any medications that you are taking should be considered, as some medications can alter your blood sugar levels and increase your risk of diabetes.

The two main tests used to diagnose diabetes are:

- The fasting plasma glucose test – for this test, you are not allowed to eat or drink for at least 8 hours before taking the test. Your doctor will then take a sample of your blood, usually in the morning before breakfast, to measure your sugar levels.
- The oral glucose tolerance test – for this test, you are not allowed to eat or drink for at least 8 hours before taking the test. In the morning before breakfast, you will have to drink a very sweet solution of sugar. Before and after drinking the solution, your doctor will take samples of your blood to measure your sugar levels.



SELF HELP

Learn to recognise the early signs of hypoglycaemia (low blood sugar). These include sweating, rapid heartbeat, headache, confusion, and jitteriness.

Under such circumstances, the immediate consumption of quick-acting carbohydrates, such as chocolate or sweets, can help. Adjustments in medication may also be needed if hypoglycaemia occurs frequently, so always keep your healthcare provider updated regarding the regularity of these events.

Wait until you feel better before driving.

Keep your feet clean, and watch closely for any signs of infection. Visit the foot doctor every year. Have regular eye tests and a full eye examination every year.

It is always helpful to carry details of your diabetic status, with contact telephone numbers, in case of an emergency.

A neck chain, or identity bracelet, can help to alert others to your condition.

You will see different doctors/nurses for diabetes. You should remind your doctors that they need to talk to your other doctors/healthcare providers in addition to telling you of any medications/facts.

Management of diabetes

Some of the best ways in which you can manage diabetes includes the following:

- Lose excess weight and keep it off. For some people, losing a few extra kilos may be enough to keep their blood sugar levels within the normal range.
- Exercise more frequently to improve your physical fitness, to lose weight, and to normalise your blood sugar levels. Try to progressively increase your physical activity to 30 minutes a day.
- Try to reduce or even stop smoking.
- Eat a healthy diet that is low in calories and fat.
- Avoid alcohol.
- Have your blood sugar levels measured regularly. This can be done by either: making regular appointments with your doctor who can measure the levels of sugar in your blood, or by using a home testing kit that measures the levels of sugar in a drop of your blood.
- It is important that you take your medication correctly.
- Inform all members of your healthcare team that you have diabetes, and encourage them to speak with other so that they are aware of the different types of treatments that you may be receiving, and can therefore determine how best to treat you.

