

# Diabetes in seniors



## What is diabetes?

Diabetes (also called diabetes mellitus) is a chronic (ongoing) condition characterised by high blood glucose (blood sugar) levels due to the body's inability to produce or respond to insulin, a hormone that allows blood glucose to enter the cells of the body and be used for energy.

## Why are seniors at risk of diabetes?

Of course, seniors (those over 65) are not the only people to be affected by diabetes: type 1 diabetes (previously known as insulin-dependent diabetes or juvenile-onset diabetes) is usually diagnosed during childhood, while type 2 diabetes (previously known as non-insulin dependent diabetes or adult-onset diabetes), the most common type, is usually diagnosed in adults over the age of 45, although a growing number of young people are developing type 2 diabetes. Gestational diabetes is a type of diabetes that occurs only during pregnancy.

Type 2 diabetes is linked to an unhealthy lifestyle. Major risk factors for diabetes include age, being overweight, genetic predisposition to diabetes, and a reduction in activity levels. The rates of type 2 diabetes steadily increase with age.

Type 2 diabetes is most likely to occur if you:

- ▶ are over 45 years old and have high blood pressure;
- ▶ are over 45 years old and are overweight;
- ▶ are over 45 and have (or have had) one or more family members with diabetes;
- ▶ are over 55 years of age;
- ▶ have had a heart attack in the past;
- ▶ have heart disease;
- ▶ have or have had a blood sugar test that is borderline-high;
- ▶ have or have had high blood sugar levels during pregnancy (a condition called gestational diabetes);
- ▶ have polycystic ovary syndrome and are overweight;
- ▶ are an Aboriginal Australian or Torres Strait Islander and are over 35 years old (or younger if overweight); or
- ▶ are a Pacific Islander, are from a Chinese cultural background or are from the Indian sub-continent and are over 35 years old.

## What are the effects of diabetes on seniors?

A key issue for seniors with diabetes is that, sometimes, the symptoms may not be very obvious.

The well-known symptoms of diabetes, such as urinating excessively and feeling thirsty all the time, are not as obvious in the elderly as in young people.

In addition, symptoms of type 2 diabetes, such as feeling tired and lethargic, can often be misinterpreted as just part of the normal ageing process.

As a result, older people with diabetes may be relatively free of symptoms and may remain undiagnosed until damage has been done.

If left unchecked, the accumulation of glucose in the blood can cause enormous damage to nearly every major organ in the body, including kidney damage; artery damage, which increases the risk of stroke and heart attack; eye damage, leading to vision loss; erectile dysfunction (impotence) in men; and nerve damage, which can lead to traumatic injury and infection, possibly leading to limb amputation.

It's unlikely you'll be able to mend the damage that has already been done, but you and your doctor can work together to control your blood sugar and help minimise the impact of diabetes in the future.

With many Australians now living to the age of 80+ years, preventing long-term complications of diabetes from further damaging your health is vital. For example, your doctor might recommend that you take a small dose of aspirin every day to help reduce your chances of having a heart attack or stroke, especially if you have vascular (blood vessel) problems.

## How do other conditions affect my diabetes?

Many older people also have other conditions as well as diabetes, and this can complicate diabetes management.

For example, high blood pressure or high levels of certain fats in the blood can speed up the progression of common complications of diabetes, such as kidney problems, eye problems, foot problems and heart and blood vessel problems.

People with diabetes whose blood glucose levels are high are more prone to infections than people with normal blood glucose levels, so, as well as keeping your blood glucose levels in check, you should also take precautionary measures against additional infection, for example, by having regular vaccinations against 'flu and pneumonia.

Some medications, herbs and supplements can also have an impact on your blood glucose levels, so make sure you tell each doctor, pharmacist and complementary healthcare practitioner who treats you that you have diabetes so they can recommend the appropriate treatment for you.

## What can my doctor do to help me manage my condition?

Your doctor can:

- ▶ run blood tests regularly to check that your diabetes is under control;
- ▶ check your eyes regularly to keep track of possible eye disease (diabetic retinopathy);
- ▶ monitor your weight and help you lose weight if you need to;
- ▶ measure your blood pressure regularly and provide treatment for high blood pressure, if present;
- ▶ check the health of your feet for any signs of foot ulcers or infections and recommend a specialist or podiatrist to help manage

- any diabetic foot problems, if necessary;
- ▶ monitor your levels of cholesterol and triglycerides (types of fat found in the bloodstream) regularly, and provide treatment if your levels are outside the normal range;
- ▶ conduct regular urine tests to check for any kidney problems (diabetic nephropathy);
- ▶ keep vaccinations against 'flu and pneumococcal disease up-to-date to help prevent additional illness; and
- ▶ prescribe tablets known as oral hypoglycaemic agents (or insulin, if necessary), if adopting a healthier lifestyle hasn't helped you to control your diabetes.

## What can I do to help manage my condition?

You can:

- ▶ work with your doctor and any other healthcare professionals, such as diabetes educators, to learn how to keep control of your diabetes;
- ▶ keep in regular contact with your doctor;
- ▶ see a podiatrist for regular check-ups;
- ▶ wear proper footwear and examine your feet every night to check for problems;
- ▶ tell all the health professionals with whom you come in contact that you have diabetes;
- ▶ conduct regular blood glucose monitoring to keep track of your condition;
- ▶ watch your diet and make healthy choices such as eating less fat and more healthy, carbohydrate-containing foods such as fruit, vegetables, bread and legumes;
- ▶ quit smoking, if you smoke;
- ▶ lose weight if you need to;
- ▶ do some form of physical activity, under the guidance of your doctor;
- ▶ keep any recommended vaccinations up-to-date; and
- ▶ ensure you take your medication according to your doctor's instructions.

Remember, while untreated diabetes puts you at significant risk of a range of serious health problems, this risk can be vastly improved by appropriate medical and lifestyle treatment.

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