

Medication

Diabetes medications are usually needed for people with type 2 diabetes. As time goes by healthy eating and exercise are not enough to keep blood glucose on target. Medication (tablets and / or insulin) are needed in addition to healthy eating and exercise. Together you and your doctor will choose medication most suitable for you.

Your needs will change over time. The longer you have diabetes the more medication you may need. Many people with type 2 diabetes need insulin as well as tablets.

To make sure diabetes medications are working effectively regular blood glucose testing is necessary. Testing can be done at home as well as at a blood test (A1c) at the doctor's surgery.

Types of tablets

There are six types of medication: metformin, sulphonylureas, acarbose, glitinides, glitazones and GPL-1 agents. Each tablet has a chemical name (generic) and one or more trade names. Metformin and sulphonylureas are the most frequently prescribed. The medications work in different ways and vary in dosage, strength and side effects.

Generic name	Trade name
Metformin	
Metformin	Diabex, Diabes XR, Diaformin, Genrx, Glucohexal, Glucomet, Glucophage, Metformin, Metformin-BC
Metformin glibenclamide	Glucovance
Sulphonylureas	
Glibenclamide	Daonil, Euglocon, Glimel, Semidaonil, Nidem
Gliclazide	Diamicron MR, Glyade, Genrx, Gliclazade, Nidem
Glimepiride	Amaryl
Glipizide	Minidiab, Melizide
AlphaglucoSIDase inhibitors	
Acarbose	Glucobay
Glitinides	
Repaglinide	NovoNorm
Glitazones	
Pioglitazone	Actos
Rosiglitazone	Avandia
GLP-1 agents	
Exenatide	Byetta (given as twice daily injection)
Sitagliptin	Januvia



Metformin helps the body use the available insulin more effectively and may help with weight loss in certain people.

Sulphonylureas work to increase the amount of insulin from the pancreas.

Acarbose slows the absorption of carbohydrate foods as they are being digested and can help reduce blood glucose levels after meals.

Glitinides cause a short and brisk increase in insulin levels. Tablets are taken before meals and can also help control blood glucose levels after meals.

Glitazones increase the body's response to insulin.

GLP-1 agents mimic (exenatide, an injection) or enhance (sitagliptin, a tablet) the action of a natural hormone (GLP-1) and help control blood glucose levels before and after meals.

Important points

1. Know the name and dose of your medications (write it down and keep this information handy).
2. Only take the type and number of medications prescribed by your doctor.
3. Take the medications at the prescribed time. It is important not to forget to take your medications.
4. Make sure you have regular meals and take your medication with your meals.
5. If medications are causing side effects notify your doctor. Discuss with your doctor before changing the dose.
6. Remember that taking other medication may react with your diabetes medication. Consult the pharmacist or your doctor.

Other things to remember

1. Diabetes medications are not a substitute for healthy eating and regular activity.
2. If you are unwell and are unable to eat notify your doctor and ask for advice about your medication.
3. If you forget to take your usual dose seek advice from your doctor.
4. Sometimes during illness or surgery it may be necessary to change these medications to insulin.
5. If you need to go to hospital, you should tell the staff that you have diabetes.
6. If you intend becoming pregnant you should discuss this with your doctor.
7. Store medications in their original tightly closed container away from heat and direct sunlight.
8. Keep medications out of reach of children.

If you have any problems or concerns about your medications, discuss them with your doctor, diabetes educator or pharmacist.

Side effects of tablets	What you should do
<p>Metformin can cause nausea and diarrhoea especially if dose is increased too quickly or the person has it on an empty stomach.</p>	<p>If you have diarrhoea this usually settles, but if not or if it is severe notify your doctor.</p>
<p>Sulphonylureas can cause hypoglycaemia (low blood glucose) if the dose is too high, if meals are missed or inadequate, or with increased exercise. Weight gain can also occur.</p> <p>Alcohol may also interact with some sulphonylureas tablets.</p>	<p>Check your symptoms by testing your blood glucose level. If below 4mmol/L treat for hypoglycaemia.</p> <p>Alcohol consumption should be discussed with your health professional.</p>
<p>Acarbose sometimes produces gastro-intestinal side-effects such as abdominal pain, diarrhoea and flatulence.</p>	<p>Acarbose should not be used by people with serious gastro-intestinal disorders. (If combined with sulphonylureas or glitinides use 'glucose only products' to treat hypoglycaemia.)</p>
<p>Glitinides can sometimes cause hypoglycaemia, weight gain or gastro-intestinal disturbances.</p>	<p>Check your symptoms by testing your blood glucose level. If below 4mmol/L treat for hypoglycaemia.</p>
<p>Glitazones cause increased fluid or fat under the skin and can affect some blood tests.</p>	<p>If you have weight gain, heart failure or ankle swelling, talk to your doctor.</p>
<p>GPL-1 agents can cause nasal stuffiness (sitagliptin), nausea, vomiting and injection site reactions (exenatide).</p>	<p>If you develop these symptoms notify your doctor.</p>



For more information

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