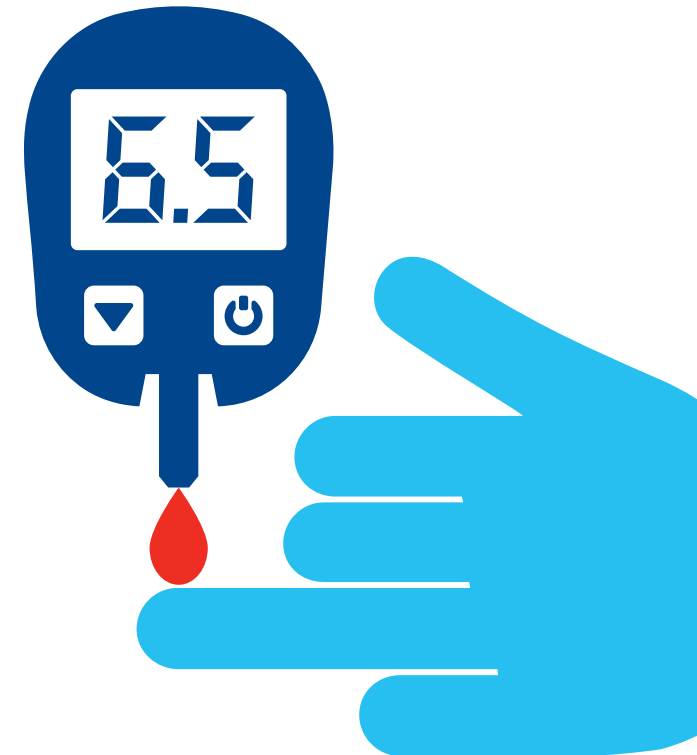




for Dental Teams



9 Ethnicity, inequality and oral health

- People with learning difficulties have high rates of Type 2 diabetes and oral disease
- People with serious mental illness – 20% have Type 2 diabetes, 70% of these are unaware they have diabetes and die 20 years earlier
- Disadvantaged-minority ethnic groups and economically deprived have high rates of Type 2 diabetes and oral disease
- Type 2 diabetes: 6 times more common in South Asians and 3 times in African-Caribbeans



10 Who to contact and useful information

- Diabetes UK: www.diabetes.org.uk
- Trend UK: trend-uk.org
- European Federation of Periodontology: www.efp.org
- See www.knowdiabetes.org.uk for more information



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1 Listen to the person

- They live with their diabetes 365 days a year
- Diabetes can impact general wellbeing and oral health



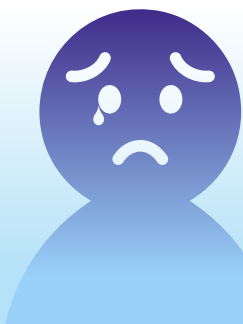
2 Types of diabetes

- People with Type 1 diabetes need insulin every day of their life
- People with Type 2 diabetes may not be prescribed any medication but many people can be on tablets, injectable therapies, insulin or a combination of these
- In UK 1 million people have Type 2 diabetes that has not been diagnosed



3 Remember living with diabetes can be overwhelming

- Dental self-care may be less than ideal
- Don't blame the patient!
- Anxiety, depression and memory difficulties are common in diabetes



4 Impact of diabetes and oral health is bi-directional

- Bad periodontal condition in presence of good oral care: consider possible undiagnosed diabetes
- Improved periodontal health can reduce blood glucose levels
- Improved blood glucose reduces oral complications and risk of caries
- Oral diabetes complications- periodontitis, candidiasis, caries, white patches



5 Hypoglycaemia is a medical emergency (low blood glucose below 4mmol/L)



- Immediate actions:
Step 1: 200 mls lucozade original OR Small carton of fruit juice OR 4-5 glucose tabs OR 4-5 dextrose tabs OR 4-5 jelly babies
Step 2: Follow with a starchy snack such as a sandwich, a banana or 2 digestive biscuits
- Common symptoms: anxiety, sweaty, sleepy, pale aggressive, confused and unconscious
- Be familiar with your local treatment pathway: www.trend-uk.org (hypoglycaemia explained)
- Ensure you have treatment for hypoglycaemia in your practice
- Call 999 if unable to swallow or unconscious



6 Hyperglycaemia (high blood glucose consistently in double figures)

- Common symptoms: thirst, blurred vision, extremely tired, recurrent infections, increased urination, weight loss
- Common causes: virus eg **COVID-19**, infections, being unwell, missed diabetes medications, newly prescribed or increased steroids or anti-psychotic medication, patient may have eaten more carbohydrate than their body or medication can cope with, over treatment of an earlier hypo, undiagnosed diabetes
- Prolonged high blood glucose can develop into life threatening Diabetes ketoacidosis (DKA)
- DKA: you may notice that your patient's breath smells of pear-drops or acetone



7 Insulin and medication impact

- Be aware of common diabetes tablets and their effect on oral health
- www.healthiernorthwestlondon.nhs.uk/news/2019/09/03/north-west-london-diabetes-guidelines-revised



8 Dental procedures

- If emergency procedure needed with HbA1c > 69mmol/mol: ensure follow up with dentist/GP
- If routine procedure needed with HbA1c > 69mmol/mol: advise GP/diabetes care provider review before treatment
- Discuss and agree action plan with your patient/GP/diabetes care provider
- Consider monitoring blood glucose during your lengthy and complicated treatment sessions

