

Diabetes and the Elderly

What is diabetes?

Diabetes is a disease involving a hormone called insulin and its regulation. In diabetes, your body either does not make enough insulin or does not respond to the insulin it makes in the usual way. As a result, you have high blood sugar levels.

Diabetes affects about one in five people over the age of 65. Older adults can develop either type 1 (insulin-dependent) or type 2 (non-insulin-dependent) diabetes. However, most elderly people with diabetes have type 2.

What happens if it is not treated?

Complications of untreated diabetes include blindness, kidney disease, nerve disease, infections, heart disease, and strokes. Rates of these illnesses are much higher in diabetic patients.

How is diabetes treated?

You and your doctor will determine the goal of your diabetes treatment after a complete evaluation of your condition. The usual goal is to lower blood sugar to normal levels, but this may be different depending on your situation.

Initially, you may be able to control your diabetes by changing your diet and exercise habits.

However, you may eventually need to take either pills or insulin—even if you have type 2 diabetes. Talk to your doctor about which of the many diabetes drugs are best for you.

You can help track your blood sugar on a home monitor to help you better manage your diabetes.

What medicines are best for elderly people with diabetes?

None of the six type of diabetes pills is absolutely unsafe for elderly patients, but some need to be used with more caution than others. Diabetes pills include:

- **Alpha-glucosidase inhibitors** (Precose and Glyset). These drugs slow the digestion of starches and sugars and are used for mild cases of diabetes. Side effects include gas and diarrhea. The pills should be taken with food. They do not cause low blood sugar (hypoglycemia) when used alone.
- **Sulfonylureas** (sold under many names, including Glucotrol, Micronase, Glynase, and Diabeta). These drugs help your body make more insulin. Side effects can include low blood sugar and weight gain. The longer-acting types of these drugs can cause more low blood sugar problems for older

patients. If you are having low blood sugar, tell your doctor.

- **Other insulin secretagogues** (such as Prandin and Starlix). These also help your body make insulin. They can cause low blood sugar, but may be useful in place of sulfonylureas if you have low blood sugar between meals.
- **Glucophage**. This drug improves your body's use of insulin. Elderly people should have a test called creatinine clearance to show that they have fully functioning kidneys before and while taking this medication. This type of drug is often avoided for people older than 80. Side effects include gastrointestinal upset and diarrhea. Do not take this drug if you will be exposed to dye used in radiological tests such as CT scans.
- **Thiazolidinediones** (Avandia and Actos). These drugs increase insulin's effects in your body. If you take one of them, you should have periodic liver tests. These drugs are less likely to cause low blood sugar.

