

# Guidance for people with diabetes having an Upper GI Endoscopy, ERCP or Bronchoscopy



## Endoscopy Patient Information

This booklet has been designed by our endoscopy team, with input from our colleagues in the diabetes team. It is to provide support to persons with diabetes attending for a gastroscopy, which is an endoscopy to examine the upper gut via the mouth (OGD), or via the nose is (trans-nasal endoscopy). This booklet also applies to those having an endoscopic examination of the lungs (bronchoscopy). If you have any questions about the information or instructions in this booklet, please do not hesitate to call the department on:

Endoscopy nursing team: 01225 821425 or 01225 821788

This leaflet is aimed at people who take medication for type 1 diabetes or type 2 diabetes. If you manage your diabetes with diet alone, you do not need to read this leaflet.

## How do I prepare for my procedure?

It is vital you inform the endoscopy department that you have diabetes prior to your procedure; you may have already discussed this in a clinic appointment with your specialist. Alternatively, you may be offered a pre-assessment clinic review where it can be discussed. If you are not sure we know about your diabetes, speak to one of our endoscopy nursing team by phoning on the numbers above available weekdays from 08.00 – 17.30.

## How do I prepare the day before Upper GI Endoscopy (OGD, TNE), ERCP or bronchoscopy?

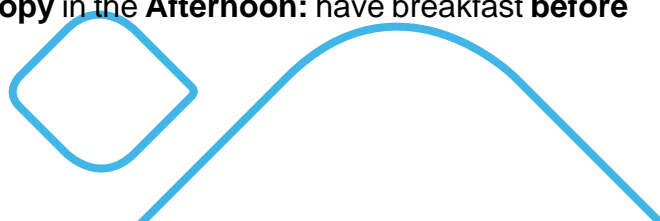
You should not need to change your diet or medications the day before your procedure.

## What can I eat on the day of the procedure?

For an **Upper GI Endoscopy / ERCP** in the **Morning**: do **not** eat any food **after midnight** on the night before.

For a **bronchoscopy** in the **Morning**: do **not** eat any food **from 3 hours before** procedure (**after 4am** the night before).

For an **Upper GI Endoscopy / ERCP or bronchoscopy** in the **Afternoon**: have breakfast **before 7am** and do **not** eat food after this time.



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## What can I drink on the day of the procedure?

For an **Upper GI Endoscopy**: you can have **clear fluids** until six hours before.

For a **bronchoscopy**: you can have **clear fluids** until four hours before.

Clear fluids include:

- Water
- Black tea and coffee
- Sugar free squash or smooth fruit juice without bits
- Fruit tea
- Clear fizzy drinks e.g. lemonade

During times that you cannot have anything to eat or drink, you may still have sips of water to swallow essential prescribed medication e.g. for blood pressure.

If you are known to have slow transit through your upper gut due to diabetes (delayed gastric emptying or gastroparesis) we would advise discussing a longer period 'nil by mouth' with your specialist or the endoscopy nursing team.

## Look out for hypoglycaemia (low blood glucose)

Fasting can make you more likely to get hypoglycaemia. If you have any symptoms of hypoglycaemia such as sweating, dizziness, blurred vision or shaking please test your blood glucose if you are able to do so.

### What to do?

If your blood glucose is less than 4mmol/l take ONE of:

- 4 – 5 GlucoTabs or 5 – 6 Dextrose tablets or;
- 4 Jelly Babies or;
- 150 – 200ml of clear fruit juice or;
- 150 – 200ml of non-diet fizzy drink

Please tell staff at the hospital that you have done this because it may not be safe to proceed with your procedure.

## What should I bring with me to hospital?

Ensure you bring:

- Glucose tablets, or a sugary drink, or a pack of jelly babies.
- Blood sugar testing equipment.
- Ensure you **tell hospital staff you have brought these.**

## What about my diabetes medications?

If you take medication for your diabetes, you may need to change the doses before your procedure.

**Tablet or GLP-1 injections:** The following table will tell you what to do with your diabetes tablets/injections. If you are taking more than one, please follow the instructions for each of them.

**SGLT-2 Inhibitors:** If you are taking an SGLT-2 inhibitor, (see table page 7), please do not take on the day before surgery. All other oral diabetes medications should be taken, as usual, the day before surgery.

Medication	Procedures in the Morning	Procedures in the Afternoon
<b>Metformin</b>	Take as usual unless specifically advised not to	Take as usual unless specifically advised not to
<b>Sulfonylureas</b> <ul style="list-style-type: none"><li>▪ Gliclazide</li><li>▪ Glibenclamide</li><li>▪ Glipizide</li><li>▪ Glimepiride</li></ul>	Skip morning dose. Only take evening dose if eating	Do not take
<b>Pioglitazone</b>	Take as usual	Take as usual
<b>Meglitinides</b> <ul style="list-style-type: none"><li>▪ Repaglinide</li><li>▪ Nateglinide</li></ul>	Do not take	Take usual morning dose with breakfast
<b>DPP-IV inhibitors</b> <ul style="list-style-type: none"><li>▪ Sitagliptin</li><li>▪ Saxagliptin</li><li>▪ Vildagliptin</li><li>▪ Alogliptin</li><li>▪ Linagliptin</li></ul>	Take as usual	Take as usual
<b>SGLT2 inhibitors</b> <ul style="list-style-type: none"><li>▪ Canagliflozin</li><li>▪ Dapagliflozin</li><li>▪ Empagliflozin</li></ul>	Do not take	Do not take
<b>GLP-1 injections or tablets</b> Exenatide, Dulaglutide, Liraglutide, Lixisenatide, Semaglutide/Rybelsus, Tirzapeptide (Mounjaro)	Take as usual	Take as usual

## What about my insulin?

Insulin	Procedures in the Morning	Procedures in the Afternoon
<b><u>BASAL/LONG-ACTING INSULINS:</u></b>	<b>Day before procedure:</b> Reduce your dose by 20% if you usually take insulin at lunchtime or in the evening (take morning dose as usual).	<b>Day before procedure:</b> Reduce your dose by 20% if you usually take insulin at lunchtime or in the evening (take morning dose as usual).
Lantus		
Levemir		
Insulatard	<b>Morning of procedure:</b> If you take a morning dose, reduce this dose by 20%.	<b>Morning of procedure:</b> If you take a morning dose, reduce this dose by 20%.
Humulin I		
Abasaglar	<b>After your procedure:</b> Restart your normal insulin when you are eating and drinking normally if you take once daily at lunchtime. Take usual evening dose	<b>After your procedure:</b> Restart your normal insulin when you are eating and drinking normally if you take once daily at lunchtime. Take usual evening dose.
Toujeo		
Tresiba		
Semglee		
<b><u>BIPHASIC/MIXED INSULINS:</u></b>	<b>Morning of operation:</b> Take half your usual morning dose. Skip lunchtime dose if taken.	<b>Morning of operation:</b> Take half your usual morning dose. Skip lunchtime dose if taken.
Novomix 3		
Humulin M3		
Humalog Mix 25	<b>After your operation:</b> Restart usual evening dose with evening meal if eating and drinking. Take half usual dose if eating a small meal only.	<b>After your operation:</b> Restart usual evening dose with evening meal if eating and drinking. Take half usual dose if eating a small meal only.
Humalog Mix 50		
<b><u>SHORT ACTING/ MEALTIME INSULIN:</u></b>	<b>Morning of operation:</b> Skip morning dose if no breakfast is eaten. Skip your lunchtime dose if not eating and drinking normally.	<b>Morning of operation:</b> Take your usual morning dose with breakfast. Skip your lunchtime dose if not eating and drinking normally.
Actrapid		
Humulin S		
Novorapid		
Fiasp	<b>After your operation:</b> Resume normal insulin with evening meal if eating a normal meal. Take half usual dose if only eating a small evening meal.	<b>After your operation:</b> Resume normal insulin with evening meal if eating a normal meal. Take half usual dose if only eating a small evening meal.
Humalog		
Apidra		
Trurapi		
Lyumjev		

\*\*If you graze through the day or eat regular snacks without taking extra insulin – REDUCE insulin by 1/3<sup>rd</sup> – (ie if 30 units normally reduce to 20 units)



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## What if I have an insulin pump?

Contact the Diabetes Centre for advice on the appropriate insulin dose adjustments or alternatives before your surgery.

## What about after the procedure?

- Eat and drink when you feel able to
- Once you are eating and drinking, please resume your usual medication schedule using the tables above for guidance on when to restart your medications and/or insulin
- Your blood glucose levels may be higher than usual for a day or so
- When you get home, if you feel nauseated, or vomit and are unable to eat refer to the “What should I do if I am unwell” section below
- If you require further follow up for your diabetes you should be informed by a member of the team at the Diabetes Centre or by your GP surgery

## What if I have further concerns or questions?

For questions relating to diabetes, you can contact:

**Diabetes Centre:** Telephone **01225 824198** or **01225 821328**  
Email [ruh-tr.disnteam@nhs.net](mailto:ruh-tr.disnteam@nhs.net)

For questions relating to endoscopy, you can contact:

**Endoscopy Unit:** Telephone **01225 821788** or **01225 821425**

## Questions, concerns and queries

If you have any questions, please do not hesitate to contact the Endoscopy Unit on 01225 821425 or 821788, on a Monday to Friday between 08.00 and 17.00.

Please contact the Patient Advice and Liaison Service (PALS) if you require this leaflet in a different format or would like to feedback your experience of the hospital. Email [ruh-tr.pals@nhs.net](mailto:ruh-tr.pals@nhs.net) or telephone 01225 825656 or 826319.

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