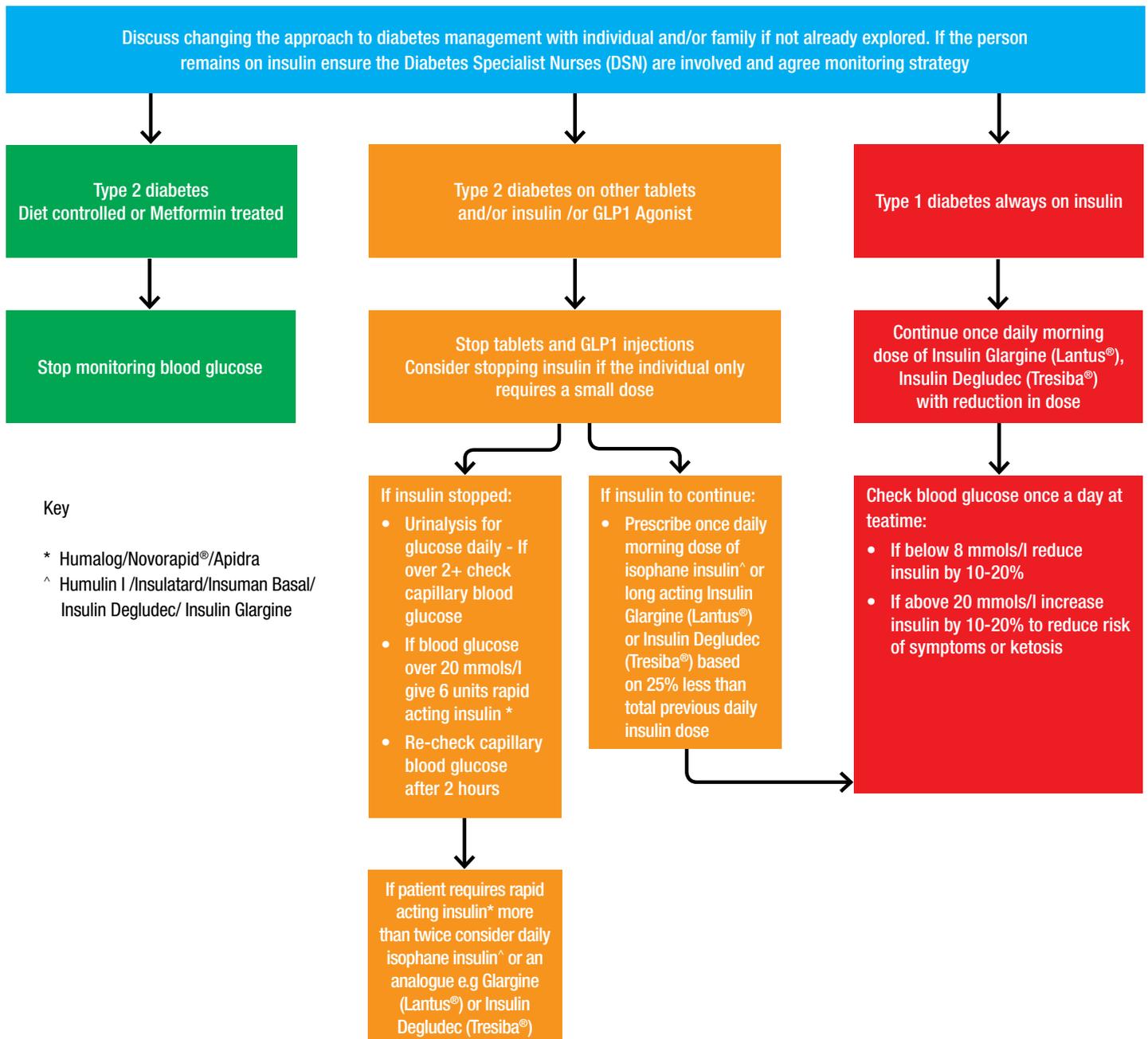


## All Wales Supplementary Symptom Control Guidance for palliative management of patients with diabetes

The algorithm for the last days of life shown below is copied directly from page 23 of the 'End of Life Diabetes Care: Clinical Care Recommendations' document and is used with the authors' permission. (Diabetes UK, March 2018, available online: [https://www.diabetes.org.uk/resources-s3/2018-03/EoL\\_Guidance\\_2018\\_Final.pdf](https://www.diabetes.org.uk/resources-s3/2018-03/EoL_Guidance_2018_Final.pdf))

**We understand that the End of Life Diabetes Care clinical guidance is being reviewed later in 2021. Clinicians using Care Decisions guidance may wish to check for the updated information online.**

Figure 1 - Algorithm for the last days of life



- Keep tests to a minimum. It may be necessary to perform some tests to ensure unpleasant symptoms do not occur due to low or high blood glucose
- It is difficult to identify symptoms due to "hypo" or hyperglycaemia in a dying patient
- If symptoms are observed it could be due to abnormal blood glucose levels
- Test urine or blood for glucose if the patient is symptomatic
- Observe for symptoms in previously insulin treated patient where insulin has been discontinued.
- Flash glucose monitoring may be useful in these individuals to avoid finger prick testing