Preparing for your gastroscopy if you have Diabetes

Information for patients living with diabetes

Endoscopy

Diabetes Management for Endoscopy Procedures

This leaflet provides guidance on how to manage your diabetes if you are undergoing an endoscopic procedure (e.g. gastroscopy, colonoscopy, sigmoidoscopy, or capsule endoscopy). Please follow the instructions carefully to ensure your safety before, during, and after the procedure.

This leaflet is for patients with diabetes who are having:

- Gastroscopy (including transnasal gastroscopy)

Why you need to follow this advice carefully

- Before your endoscopy, you will be asked not to eat or drink anything (including water) for 6 hours. This is to make the procedure as safe as possible.
- If you have diabetes, fasting can cause changes to your blood sugar levels. You may be at risk of low blood sugar (hypoglycaemia), especially if you are taking insulin or diabetes tablets.
- You may also notice your blood sugar is higher than usual for a day or two after the test. This should settle quickly.

What is hypoglycaemia (a ‘hypo’)?

Symptoms include:

- Sweating heavily
- Trembling and shakiness
- Anxiety
- Tingling of the lips
- Hunger
- Palpitations
- looking pale.

If your blood sugar is below 5.0 mmol/L or you feel unwell, treat it with one of the following:

- 200 ml (small carton) of smooth orange juice
- 5 GlucoTabs

- 6 Dextrose tablets
- 5 Jelly babies

If you have needed treatment for hypoglycaemia within 6 hours of your procedure, please tell the nurse on arrival.

How to prepare, based on your diabetes treatment

If you take tablets or insulin to treat diabetes:

Please refer to the charts below to find your diabetes medication and follow the administration instructions provided.

The day before test and day of your test:

- If you normally check your blood sugar level, check it every 2 hours.
- If your blood sugar level is below 5mmol/L or you have any of the symptoms of hypoglycaemia, have a sugary drink as described earlier.

The day after your test:

- When you start eating normally again, you can start taking your diabetic tablets and insulin as normal.
- If you normally check your blood sugar level, check it every 2 hours for the first 4 hours after the test, and then every 4 hours for the next 2 days.
- If you do not normally have to check your blood sugar level, watch out for the symptoms of a hypo and take sugary drinks as necessary.

Medication	
Canagliflozin (Invokana®), Dapagliflozin (Forxiga® / Farxiga®), Empagliflozin (Jardiance®), Ertugliflozin (Steglatro®), Or combination medications, e.g. Xigduo®, Qtern®	
When	**What to do**
Day before procedure	Do not take your SGLT2 inhibitor
Day of procedure (morning or afternoon)	Do not take
Day after	Resume your usual dose once you are eating and drinking normally

Medication	
Semaglutide (Rybelsus® – oral), Liraglutide (Victoza® – injection), Exenatide (Byetta®), Lixisenatide (Adlyxin®)	
When	**What to do**
Day before	Do not take
Day of procedure (morning or afternoon)	Do not take
Day after	Resume as normal once eating and drinking

Medication	
Dulaglutide (Trulicity®), Semaglutide (Ozempic®, Wegovy®), Tirzepatide (Mounjaro®)	
When	**What to do**
Week of procedure	Miss your weekly dose if it falls before the procedure
Day of procedure	Do not take
Day after	Resume at your next scheduled dose if you are eating and drinking normally

Medication		
Other diabetic tablets or non-insulin injectables		
When	**Morning procedure**	**Afternoon procedure**
Day before	Take your usual dose	Take your usual dose
Day of procedure	Do not take any diabetes tablets or injections	Take your usual morning dose with a light breakfast, but skip your midday dose
Day after	Resume your usual routine once eating and drinking	Resume your usual routine once eating and drinking

Medication	
Once daily morning insulin - Lantus®, Levemir®, Tresiba®, Insulatard®, Humulin I®)	
When	**What to do**
Day before	Take your usual dose
Day of procedure (any time)	Take four-fifths (4/5) of your usual dose
Day after	Resume your normal dose

Medication	
Once daily evening insulin - Lantus®, Levemir®, Tresiba®, Abasaglar®, Toujeo®)	
When	**What to do**
Day before	Take four-fifths (4/5) of your usual evening dose
Day of procedure	Resume your usual routine once eating and drinking
Day after	If not eating, continue only your background insulin
	Resume your normal dose once eating again

Medication		
Twice daily mixed insulin - Novomix 30®, Humulin M3®, Humalog Mix 25® or 50®)		
When	**Morning procedure**	**Afternoon procedure**
Day before	Take your usual dose	Take your usual dose
Day of procedure	Do not take your morning dose	Take half (½) your usual dose with a light breakfast
After procedure	Take half (½) your usual dose with your first meal	Take half (½) your usual dose with your first meal
Day after	Resume your normal dose	Resume your normal dose

Medication	
Insulin pump	
When	**What to do**
Day before	Continue usual basal rate. Avoid solid food after 9 PM. If you usually have a bedtime snack, eat it before 9 PM.
Day of procedure	Keep basal rate running. Wait to give bolus insulin until you are eating again.
Day after	Resume normal use of pump, including meals and bolus doses.

Endoscopy contact details

If you have any questions or concerns, please contact the diabetes specialist nurses.

0121 507 4570

Monday – Friday 8:30am – 4:30pm

Further information

For more information about our hospitals and services please see our website **www.swbh.nhs.uk**, like us on Facebook **www.facebook.com/SWBHNHS** or Instagram **www.instagram.com/swbhnhs/**.

Sources used for the information in this leaflet

Centre for Perioperative Care (2021). Guideline for perioperative care for people with diabetes mellitus undergoing elective and emergency surgery. [Online] Available at: **https://cpoc.org.uk/sites/cpoc/files/documents/2021-03/CPOC-Diabetes-Guideline2021_0.pdf** [Accessed 24 July 2026].

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