

Joydens Wood Pharmacy

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Opening Times

Monday 9am - 6.30pm

Tuesday 9am - 6.30pm

Wednesday 9am - 6.30pm

Thursday 9am - 6.30pm

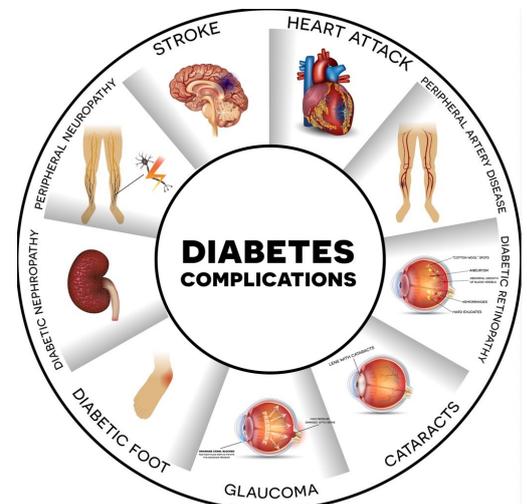
Friday 9am - 6.30pm

Saturday 9am - 4.00pm

Closed for Lunch 1pm - 2pm

Your FREE Healthy Living Leaflet for February 2020

1. What is the leading cause of sight loss in the UK?
2. How much more likely are you to get glaucoma if you are diabetic?
3. What is glaucoma?
4. Why is it vital you go to your eye screening appointments?
5. How many types of retinopathy are there?
6. How much more likely is a diabetic to have an amputation than a non-diabetic?
7. What causes diabetic complications?
8. How do I know if I have high blood sugar levels?
9. What can I do to prevent or delay the complications of diabetes?
10. What else can I do?



Answers on the bottom of page two

Complications of diabetes

High blood sugar levels can seriously damage parts of your body, including your feet and your eyes. These can be chronic and acute. Chronic complications are long term problems that can gradually develop over time leading to serious damage if they go unchecked. Acute complications can happen at any time and lead to other complications.

Chronic complications include:

- Eye problems (retinopathy)
- Foot problems
- Heart attack and stroke
- Kidney problems (nephropathy)
- Nerve damage (neuropathy)
- Gum disease and other mouth problems
- Related conditions like cancer
- Sexual problems in both men and women

Acute complications include:

- ♦ Hypo - when your blood sugars are too

low

- ♦ Hyper - when your blood sugars are too high
- ♦ Hyperosmolar Hyperglycaemic State (HHS) - a life threatening emergency that only happens in Type 2 diabetics. It is brought on by severe dehydration and very high blood sugars
- ♦ Diabetic ketoacidosis (DKA) - a life threatening emergency where lack of insulin and high blood sugars leads to a build-up of ketones

What causes diabetes complications?

As mentioned above, if your blood sugars are high over a long period of time, it will damage your blood vessels so your blood can't travel to the parts of your body it needs to. This in turn means your nerves won't work properly either and you will start to lose feeling in parts of your body.

Once you've damaged the blood vessels and nerves in one part of your body, you're more likely to develop similar problems in other parts of your body. So, if your feet are damaged, serious heart problems can follow.

The higher your HbA1c levels are, the more you are at risk of developing complications but it's not just about blood sugars, high blood pressure and smoking can put you at even more risk.

Retinopathy

Diabetes is the leading cause of preventable sight loss in the UK through diabetic retinopathy. It also makes you twice as likely to get cataracts (when your vision gets cloudy) and 1.5 times as likely to get glaucoma (when fluid builds up in your eye). There are lots of blood vessels in your eyes and if these become damaged the retina (the seeing part of your eye) can't get the blood it needs and so can't work properly.

There are four types of retinopathy:

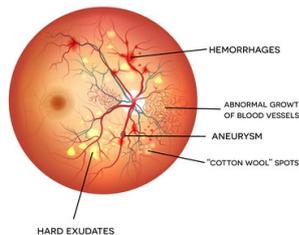
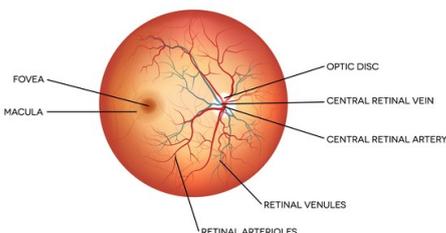
- 1) Background retinopathy - this is stage one. Your eyesight won't be affected but you need to prevent the problem getting worse
- 2) Non-proliferative retinopathy - stage two. The damage is more serious, and you'll need to get your eyes checked more often
- 3) Proliferative retinopathy - stage three. You are now at very high risk of losing your eyesight and will need treatment
- 4) Maculopathy - this is different as it affects the middle of your eye so you can't drive or read

The damage is gradual so it is possible for most people to have treatment to slow down or prevent the problems getting worse, but this will only happen if you get your eyes checked annually by your optician.

DIABETIC RETINOPATHY

NORMAL RETINA

DIABETIC RETINOPATHY



Foot problems with diabetes

Having diabetes means you are more at risk of serious foot problems and these can lead to amputation. Diabetics are 20 times more likely to experience an amputation. If you spot any of the following changes you need to see your GP:

- * Tingling sensation or pins and needles (like numbness)
- * Pain (burning)
- * A dull ache
- * Shiny, smooth skin on your feet
- * Hair loss on your legs and feet
- * Swollen feet
- * Wounds or sores that don't heal
- * Cramp in your calves when resting or walking



And if you notice any of these changes, see your local foot team urgently:

- Changes in the colour and shape of your feet
- Cold or hot feet
- Blisters and cuts that you can see but don't feel
- Foul smell coming from an open wound



For more information, chat to one of our trained staff.

Answers: Q1, Diabetes. Q2, One and a half times more likely. Q3, When fluid builds up in your eye. Q4, Because eye damage can be slowed or prevented if caught early enough. Q5, Four. Q6, 20 times. Q7, High sugar levels in your blood over a long period of time that damage your blood vessels and nerves. Q8, You can measure it over a three-month period through a test called HbA1c. Q9, Stop smoking and lower your blood pressure. Q10, Make sure you have an annual check especially on your eyes and feet.