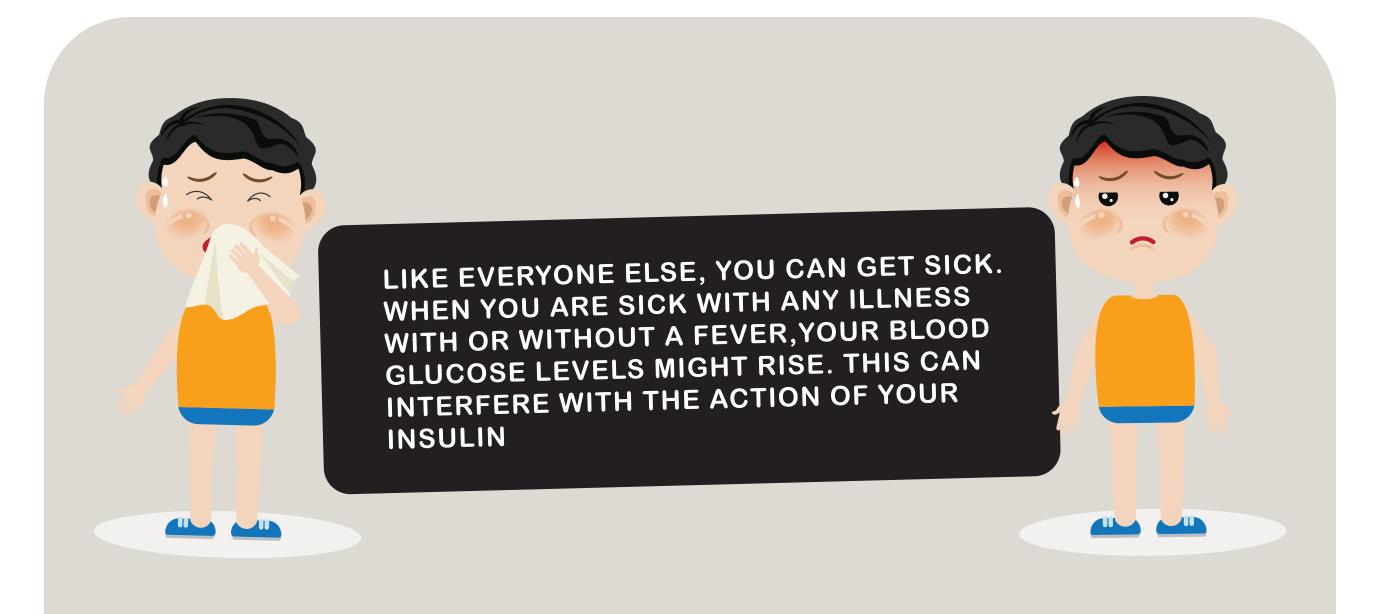


## WHAT HAPPENS TO YOUR TYPE 1 DIABETES WHEN YOU ARE SICK?











#### WHAT SHOULD I DO WHEN I AM SICK?



#### DO NOT STOP INSULIN!



INSULIN DOSE MAY NEED TO BE INCREASED OR DECREASED, BASED ON BLOOD GLUCOSE (BG) LEVEL AND FOOD INTAKE



INCREASE BG MONITORING TO 3-4 TIMES AN HOUR, IF TEST STRIPS AVAILABLE



IF UNABLE TO TEST BG
LEVELS AT HOME, ADMIT TO A
LOCAL HEALTH FACILITY FOR
REGULAR TESTING



DRINK MORE WATER AND MAKE SURE YOU EAT PROPERLY



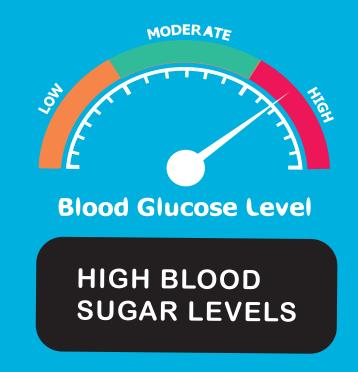
MONITORING FOR BLOOD KETONES





# HERE ARE SOME SYMPTOMS TO RECOGNIZE WHEN BLOOD KETONES ARE BEING PRODUCED BY THE BODY:

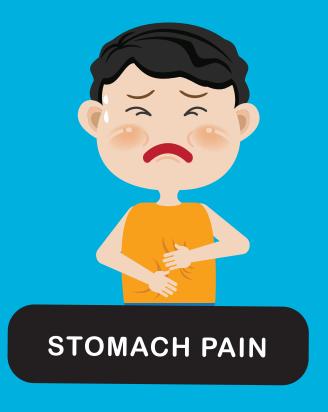






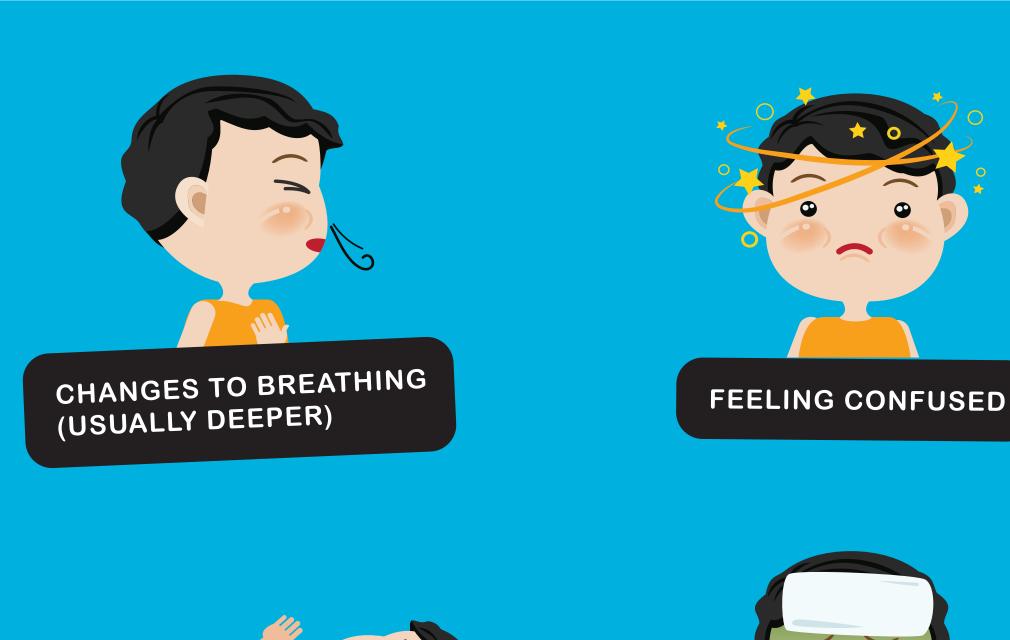




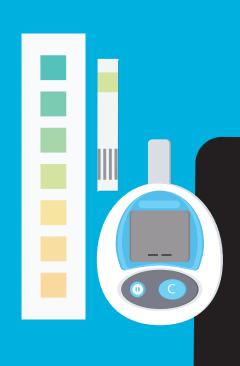












**FAINTING** 

THE BEST WAY TO TEST KETONES IS BY USING BLOOD KETONE TEST STRIPS. MANY PEOPLE DO NOT HAVE BLOOD KETONE TEST STRIPS AND THE MACHINE AVAILABLE AT HOME.
YOUR LOCAL CLINIC OR HEALTHCARE CENTRE MAY BE ABLE TO DO THIS.







MONITORING FOR BLOOD KETONES IS VERY IMPORTANT. ADDITIONAL INSULIN IS USUALLY NECESSARY TO CONTROL BG LEVELS (UNLESS THE ILLNESS CAUSES HYPOGLYCAEMIA)

IF YOU HAVE ELEVATED BLOOD GLUCOSE LEVEL WITH NO OR SMALL KETONES:

TAKE 5-10% OF TOTAL DAILY DOSE OF INSULIN AS SHORT OR RAPID-ACTING INSULIN AND REPEAT EVERY 2-4 HOURS



IF YOU HAVE ELEVATED BLOOD GLUCOSE LEVEL WITH MODERATE OR LARGE KETONES:

TAKE 10-20% OF TOTAL DAILY DOSE OF INSULIN AS SHORT OR RAPID-ACTING INSULIN AND REPEAT EVERY 2-4 HOURS





IF YOU ARE VOMITING, THIS IS A SIGN OF INSULIN DEFICIENCY AND DIABETIC KETOACIDOSIS (DKA). PLEASE CALL YOUR DOCTOR IMMEDIATELY OR GO TO THE LOCAL CLINIC/HOSPITAL



