



All of these conditions can affect Glycaemic control in non-diabetic patients but can also have greater impact on diabetic Patients with these conditions concurrently.

All patients with these conditions should have a BM checked at triage and then should have either Hyper/hypoglycaemia managed appropriately

BMs should also be checked at a minimum four times daily for patients with these conditions

# MONITORING BLOOD GLUCOSE AT THE FRONT DOOR

## Non-Diabetic Conditions Affecting Glycaemic Control



### Acute Infection

During acute illness or infection, there is often an increase in inflammatory cytokines and stress hormones, which can impair insulin sensitivity, leading to stress-induced hyperglycemia.



### Steroids

Steroids, particularly glucocorticoids (such as prednisone, dexamethasone, and hydrocortisone), can significantly impact glycemic control by altering multiple aspects of glucose metabolism. These effects can lead to elevated blood glucose levels (hyperglycemia) and, in some cases, insulin resistance.



### Chronic Kidney Disease

Chronic kidney disease (CKD) affects glycemic control through complex interactions involving insulin clearance, gluconeogenesis, metabolic acidosis, and hormonal regulation. As CKD progresses, the kidneys' ability to filter blood and maintain homeostasis is impaired, leading to alterations in glucose metabolism and insulin action.



### Liver Disease (Cirrhosis, Non-Alcoholic Fatty Liver Disease NAFLD, Hepatitis, Alcoholic Liver Disease, Hepatocellular Carcinoma)

Liver diseases affect glycaemic control through various mechanisms, including:

- Insulin Resistance from liver inflammation and fat accumulation,
- Impaired Glucose Production due to damaged liver cells,
- Reduced Glycogen Storage, limiting the liver's ability to release glucose
- Hormonal and Metabolic Imbalances that complicate glucose regulation.

Effective management of these liver diseases, along with careful monitoring of blood glucose levels, is crucial for maintaining glycaemic stability.