

YOUR DIABETES DICTIONARY: A GUIDE TO UNDERSTANDING MEDICAL JARGON



Your diabetes dictionary: A guide to understanding technical medical language (jargon)

Do you zone out when someone starts using medical terms? Here are some simple explanations so you can understand diabetes terminology.

When you or someone you love is diagnosed with diabetes, healthcare professionals may start using terms you do not understand. Get to know the basics with this handy guide.

What is diabetes and how does it develop?

In a normal body, food is broken down into glucose, which provides energy. The hormone insulin, which is produced by the pancreas, enables the body to use glucose. When the pancreas does not produce enough insulin or when the body cannot respond normally to the insulin, glucose cannot get into the body's cells to use as energy.

Since your body can no longer use the glucose from your food as energy, it accumulates in your blood, causing your blood glucose (blood sugar) levels to rise. This leads to diabetes and other serious health complications, such as heart disease, stroke, blindness, kidney failure, and nerve damage that can result in amputation.

Diabetes can be categorised in three ways

- **Type 1 diabetes** is genetic and occurs when the beta cells (insulin-producing cells) of a person's pancreas are damaged. People with type 1 diabetes need insulin injections to control their blood sugar. Type 1 affects about 5% to 10% of people who have diabetes.
- **Type 2 diabetes** is also genetic, but is often triggered by lifestyle factors. So, it is preventable. In particular, if a person is inactive or overweight, the pancreas battles to produce enough insulin to control rising blood sugar levels. Most people with diabetes have type 2.
- **Gestational diabetes** is when a high blood sugar level is first recognised during pregnancy. Usually, levels return to normal after the baby is born. Gestational diabetes can increase complications during labour and delivery. Women who have had gestational diabetes, also have a higher risk of developing type 2 diabetes later in life.

The A to Z of diabetes terminology

Here are some of the terminology healthcare professionals (such as your doctor, nurse or dietitian) may use:

- **Hyperglycaemia:** High blood sugar. This condition is fairly common in people with diabetes. It occurs when your body does not have enough insulin or cannot use the insulin it has.
- **Hypoglycaemia:** Low blood sugar. The condition also often occurs in people with diabetes. Most cases occur when there is too much insulin and not enough glucose in your body.
- **Insulin:** A hormone produced by the pancreas that helps your body to use sugar for energy. The beta cells of your pancreas make insulin.
- **Insulin pump:** A small, computerised device – about the size of a small cell phone – that you wear on a belt or put in a pocket to help make insulin treatment more convenient. Insulin pumps have a small flexible tube with a fine needle on the end. The needle is placed under the skin of your abdomen and taped in place. The pump releases a carefully measured, steady flow of insulin into your body.
- **Insulin resistance:** When the insulin has less of an effect on muscle, fat and liver cells. This occurs with both insulin produced in your body and with insulin injections. A person with insulin resistance needs higher levels of insulin to lower their blood sugar.
- **Ketones:** One of the products of fat-burning in the body. When there is not enough insulin, your body cannot use sugar (glucose) for energy so it breaks down its own fat and protein. When your body uses fat for energy, you will have acid ketones in your urine and blood. A lot of ketones in your system can lead to a serious condition, called ketoacidosis.
- **Kidney disease (nephropathy):** Changes in the very small blood vessels in your kidneys cause scarring of the kidneys, which can eventually lead to kidney failure. People who have had diabetes for a long time may develop nephropathy. An early sign of nephropathy is when proteins can be detected in your urine.
- **Lancet:** A fine, sharp needle for pricking your skin for blood sugar monitoring.
- **Neuropathy:** Nerve damage. People who have diabetes that is not well controlled, may develop nerve damage.
- **Obesity:** A term used to describe excess body fat. It is defined by a person's weight-to-height ratio or body-mass index (BMI). A BMI over 30 is classified as being obese. Obesity makes your body less sensitive to insulin's action. Extra body fat is a risk factor for diabetes.
- **Oral glucose-tolerance test (OGTT):** A screening test for diabetes. They give you a liquid with lots of glucose to drink and then measure how much glucose you have in your blood. To do this, they draw a few blood samples over the first two to three hours after you drank the liquid.
- **Pancreas:** An organ behind the lower part of your stomach that makes insulin so your body can use sugar for energy.
- **Periodontal disease:** Damage to your gums and the tissue around your teeth. People with diabetes are more likely to have periodontal disease.



- **Peripheral neuropathy:** A result of damage to your outlying nerves (such as in your fingers and toes). This often causes weakness, numbness and pain, usually in your hands and feet.
- **Retina:** The centre part of the back lining of your eye that senses light. Its many small blood vessels can be affected when a person has diabetes for a long time.
- **Retinopathy:** A disease of the blood vessels in the retina.

If you need any further information, speak to a healthcare professional or your Discovery coach.