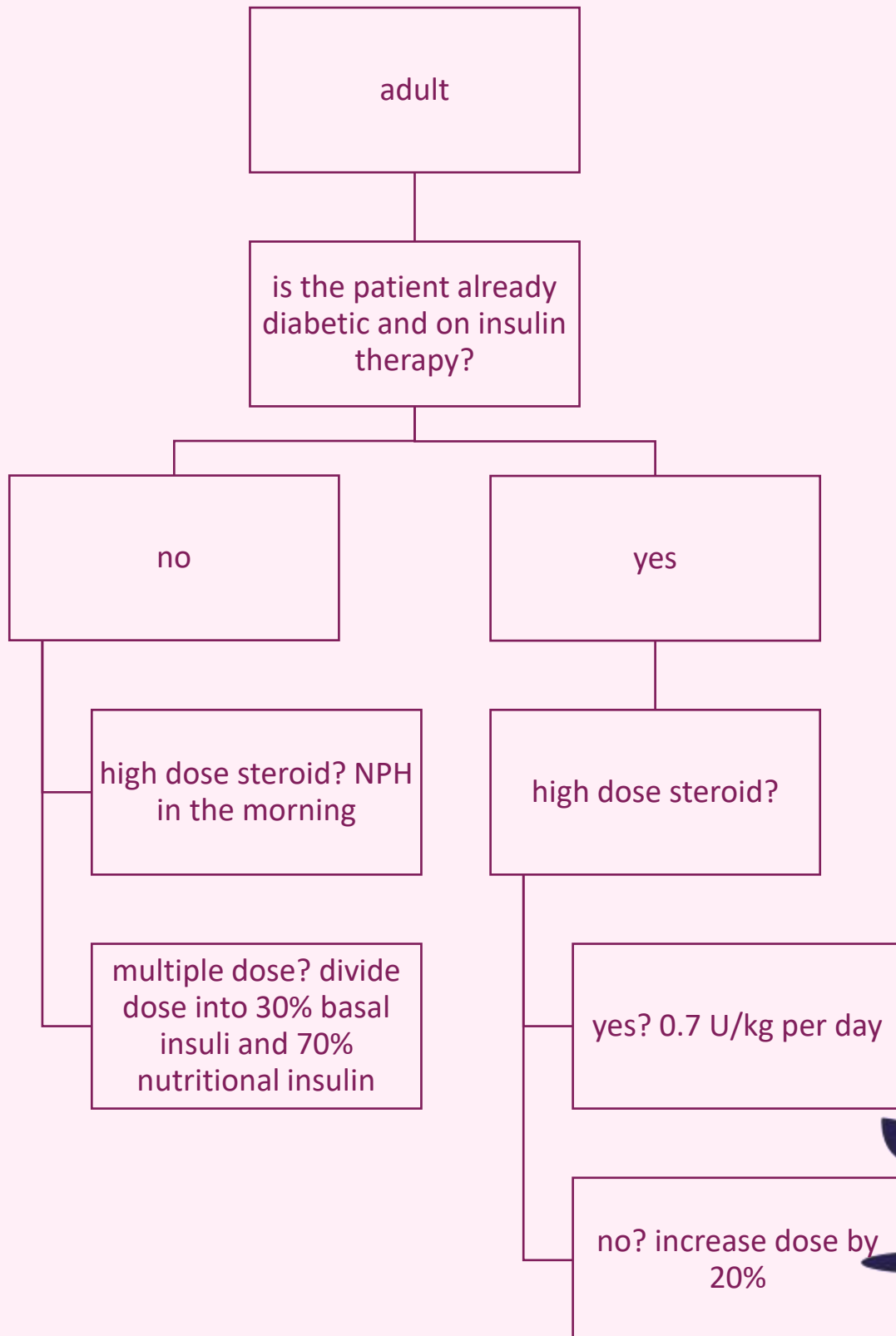
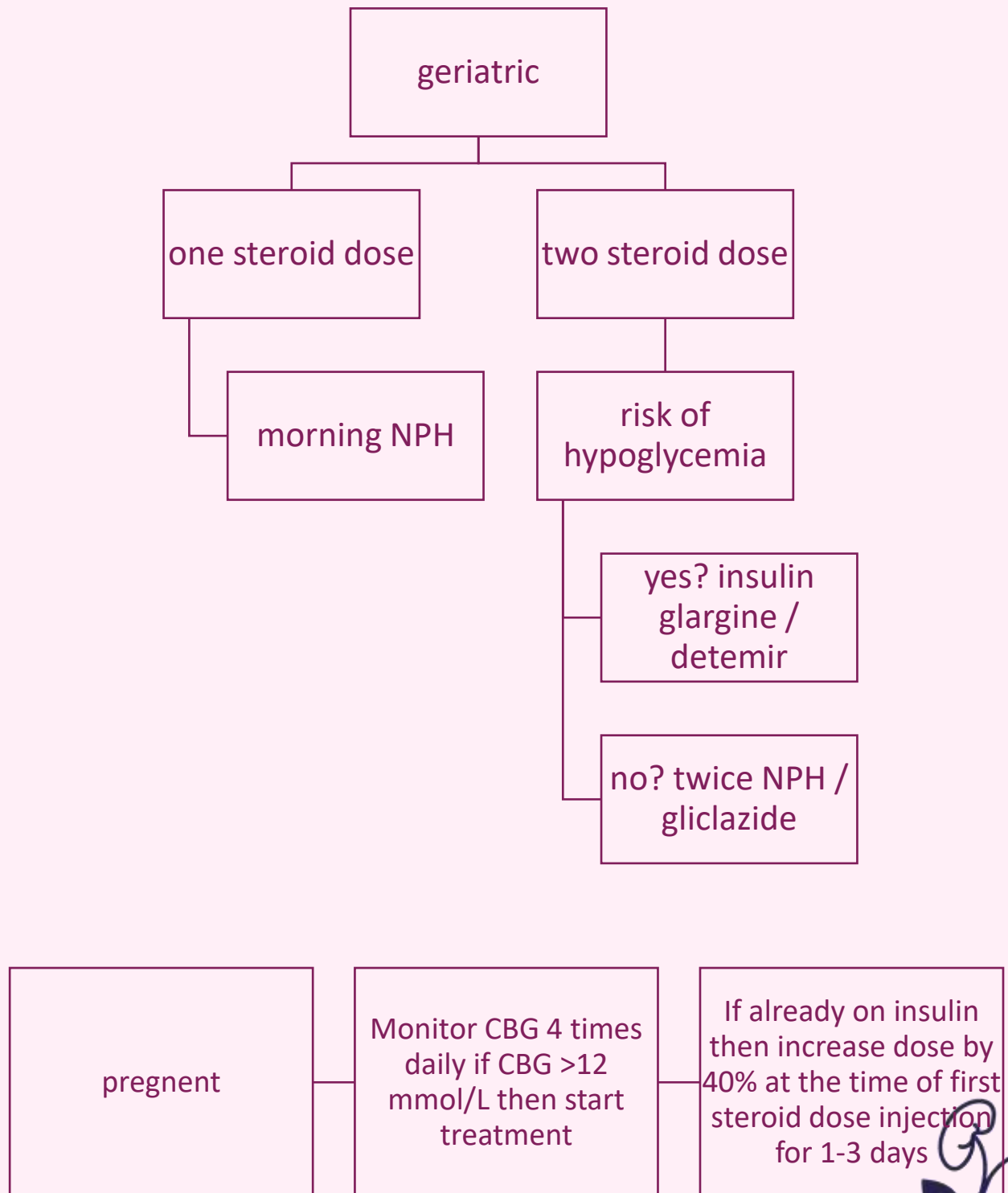


HYPERGLYCEMIA





- In hospitalized patients receiving high doses of steroids with glucose levels above 400 mg/dL, an insulin infusion pump should be indicated. ^{[1] [2] [3]}
- Screen for classic symptoms at every visit: polyuria, polydipsia, weight loss
- Monitor glucose parameters: → For at least 48 hours after GC initiation → Then every 3–6 months for first year; annually thereafter
- In children, monitor FPG annually → Annual OGTT if child is obese or has multiple risk factors for diabetes

DOSAGE ADJUSTMENTS ^[2]

- The insulin dose must be adjusted according to capillary glycemicias every 2–3 d, with increases and/or decreases around 20%.
- The percentage of insulin adjustment corresponds to half the percentage in steroid change.
- for example, if the steroid dose is reduced or increased by 50%, the insulin dose will be reduced or increased 25%, respectively

Evaluating Therapy Success

- Hemoglobin A1C <7 %
- Preprandial plasma glucose 70–130 mg/dL (3.9–7.2 mmol/L)
- Postprandial (1–2 h after a meal) plasma glucose <180 mg/dL (10 mmol/L)



Pre-diabetic patient ^[1]

- Impaired fasting glucose – fasting plasma glucose of 100–125 mg/dL (5.6–6.9 mmol/L)
- Impaired glucose tolerance with 2-h OGTT – plasma glucose levels of 140–199 mg/dL (7.8–11.1 mmol/L)
- Hemoglobin A1C 5.7–6.4 %
- patients should have a goal of losing 7 % of their body weight and 150 min of moderate exercise each week

[1]- van Raalte, D. H., R. E. van Genugten, M. M. L. Linssen, D. M. Ouwens, and M. Diamant. 2011. "Glucagon-Like Peptide-1 Receptor Agonist Treatment Prevents Glucocorticoid-Induced Glucose Intolerance And Islet-Cell Dysfunction In Humans". *Diabetes Care* 34 (2): 412-417. doi:10.2337/dc10-1677.

[2]- Tamez-Pérez, H. E., Quintanilla-Flores, D. L., Rodríguez-Gutiérrez, R., González-González, J. G., & Tamez-Peña, A. L. (2015). Steroid hyperglycemia: Prevalence, early detection and therapeutic recommendations: A narrative review. *World journal of diabetes*, 6(8), 1073–1081. <https://doi.org/10.4239/wjd.v6.i8.1073>

[3]- Roberts, A., J. James, K. Dhatariya, N. Agarwal, J. Brake, C. Brooks, and E. Castro et al. 2018. "Management Of Hyperglycaemia And Steroid (Glucocorticoid) Therapy: A Guideline From The Joint British Diabetes Societies (JBDS) For Inpatient Care Group". *Diabetic Medicine* 35 (8): 1011-1017. doi:10.1111/dme.13675

