

## Patient information

# Eating plan for adults with diabetes undergoing bowel preparation for a colonoscopy

This booklet has been written to guide people with diabetes through the eating plan during bowel preparation for a colonoscopy.

For further information on the procedure please see the 'Colonoscopy – Outpatients' patient information leaflet.

### Eating plan

The main aim of bowel preparation and the following eating plan is to ensure your bowels are as clear as possible for accurate imaging. The initial stage of bowel preparation involves following a low residue (low fibre) diet with a move to clear fluids only. See **Table 1**.

During the eating plan avoid red meat, pink fish (salmon), wholegrain foods, fruit, vegetables, pips seeds, legumes, pickles and chutneys.

Please continue any dietary restrictions you may already have due to allergies, intolerances or for other medical reason alongside the eating plan below.

**Table 1: Eating plan during bowel preparation prior to colonoscopy**

Two days before procedure:	On the day of bowel prep:	On the day of the procedure
<p><b>All day</b></p> <ul style="list-style-type: none"> <li>• Start low residue diet</li> <li>• Aim to keep carbohydrate portions similar to usual diet. See <b>Table 2</b></li> </ul> <p>Have plenty to drink from tea, coffee, squash, fizzy drinks, water, clear fruit juices (e.g. apple, grape, cranberry)</p>	<p><b>Breakfast</b></p> <ul style="list-style-type: none"> <li>• Low residue foods only</li> <li>• Aim to keep carbohydrate portion similar to usual breakfast</li> </ul> <hr/> <p><b>Post-breakfast</b></p> <ul style="list-style-type: none"> <li>• No further solid food or dairy products.</li> <li>• Clear fluids only - see <b>Table 3.</b></li> <li>• If you take pre-mixed (NovoMix 30, Humulin M3) or intermediate insulin (Humulin I, Insulatard): consume 15 - 20g carbohydrates from clear fluids at usual mealtimes – see <b>Table 3.</b></li> </ul>	<p><b>All day until after procedure</b></p> <ul style="list-style-type: none"> <li>• No solid or dairy products</li> <li>• Clear fluids only for up to two hours prior to procedure</li> <li>• If you take pre-mixed (NovoMix 30, Humulin M3) or intermediate insulin (Humulin I, Insulatard): consume 15 - 20g carbohydrates from clear fluids at usual mealtimes – see <b>Table 3.</b></li> </ul>

**Table 2: List of low residue food with approximate carbohydrate content of 100g/ml and/or certain portion size**

<b>Low residue food</b>	<b>Weight and/or certain portion size</b>	<b>Carbohydrate content</b>
<b>Dairy</b>		
Milk	100ml / half pint (284mls) / Pint (284mls)	5g / 13g / 26g
Plain yoghurt:		
Natural		8g / 10g
Greek	100g / 125g pot	5g / 6g
Cheese*	100g / 125g pot	0g
Butter*	-	0g
Margarine*	-	0g
<b>Fish*</b>	-	0g
<b>Meat*</b>	-	0g
<b>Eggs*</b>	-	0g
<b>White pasta</b>	100g / heaped tablespoon	35g / 10g
<b>White rice</b>	100g / heaped tablespoon	30g / 10g
<b>White bread</b>		
White bread	Thin slice / medium slice / thick slice	10g / 15g / 20g
White pitta	Mini pitta / standard pitta	30g / 60g
White chapatti	100g	44g
<b>Potatoes (no skin)</b>		
Boiled	Egg-sized / 100g	15g / 10g
Mashed	Ice-cream scoop / 100g	16g / 10g
<b>Soups (clear, no solid bits)*</b>	-	0g
<b>Meat extract*</b>		
Bovril®*	-	0g
Oxo®*	-	0g

Low residue food	Weight and/or certain portion size	Carbohydrate content
<b>Desserts</b>		
Clear sugary jelly (not red or orange) Boiled sweets Ice-cream Chocolate (no fruit or nut pieces)	100g 100g / 25g portion 100g / ice-cream scoop 3 squares	15g 100g / 25g 22g / 10g 10g
<b>Other</b>		
Salt* Pepper* Sugar Sweetener* Honey	- - 100g / 1 teaspoon - 100g / 1 teaspoon	0g 0g 100g / 5g - 75g / 5g

\*These foods contain no or a very small amount of carbohydrate and/or the post-prandial rise in blood glucose is very small therefore we do not count these foods as carbohydrates.

If you are unsure of carbohydrate content, refer to pictorial aid such as a book or app with pictures and weights of carbohydrate foods and their carbohydrate contents (e.g. Carbs & Cals book or app, My Fitness Pal® app) or check food labels (identify 'carbohydrates' per portion or 100g rather than 'of which sugars').

**Table 3: List of clear fluids with approximate carbohydrate content per portion as stated and/or 100ml:**

<b>Clear fluid</b>	<b>Measure and/or certain portion size</b>	<b>Carbohydrate content</b>
<b>Tea</b> (black)*	-	0g
<b>Coffee</b> (black)*	-	0g
<b>Squash</b>		
Regular (undiluted)	30ml portion	3g
No added sugar*	-	0g
<b>Fizzy drinks</b>		
Diet varieties*	-	0g
Coke	100ml / 330ml can	10g / 35g
Lemonade	100ml / half pint (284ml)	6g / 16g
Lucozade Energy®	100ml / 250ml portion	9g / 22g
<b>Water*</b>		
<b>Clear fruit juice</b>		
Apple juice	100ml	11g
Grape juice	100ml	17g
Cranberry juice	100ml	13g

\*These drinks contain no carbohydrates.

If unsure of carbohydrate content, refer to pictorial aid e.g. Carbs & Cals and/or ask patient to check food labels (identifying 'carbohydrates' per portion or 100mls rather than 'of which sugars').

Resume your usual diet after the procedure.

## Diabetes management

Please speak with your care provider for diabetes (your GP or the diabetes centre at West Suffolk Hospital) for advice on temporary changes to diabetes treatment to help minimise variations in blood sugar levels. Use the blank template at the end of the leaflet to record any treatment alterations you need to make.

If you are on insulin or oral medications for your diabetes AND test your blood sugar levels, you will need to check your levels two hourly during bowel preparation up until the procedure. You may resume usual testing frequency after the procedure.

As your diet and bowel habits will be altered, you may be at risk of variations in blood sugar levels depending on your type of diabetes and current treatment:

- You may experience hyperglycaemia (high blood sugar levels). If you currently use correction doses of insulin to manage blood glucose levels at home, then please continue to use these. Otherwise, please consult your care provider for advice on this.
- You are at also risk of hypoglycaemia (low blood sugar levels = 4mmol/l or below). You may need have regular carbohydrate snacks or sip on sugary drinks to avoid this during bowel preparation. Please see **Table 4** below for information on what to do if hypoglycaemia occurs.

You should aim for blood glucose levels between 6 to 12mmol/l unless otherwise advised by your diabetes care provider.

**Table 4: How to treat hypoglycaemia (blood sugar level 4mmol/l or below)**

<b>Step</b>	<b>Action</b>
<b>1</b>	Consume 15 - 20g rapid-acting glucose treatments, for example: <ul style="list-style-type: none"> <li>• 200ml (a small carton) of smooth orange juice</li> <li>• 150ml (half a regular can) of Coca Cola®</li> <li>• 5 glucotabs</li> <li>• 6 dextrose tablets</li> <li>• 4 standard jelly babies (use only yellow and/or green)</li> </ul>
<b>2</b>	Wait 10 - 15 minutes
<b>3</b>	Re-check blood sugar level: <ul style="list-style-type: none"> <li>• If 4mmol/l or below, repeat steps 1 - 3</li> <li>• If &gt;4mmol/l move on to step 4</li> </ul>
<b>4</b>	If you are not due a meal, eat some starchy low residue food or sip on sugary clear fluids, depending on which stage of the eating plan you are at.
<p><b>Please note:</b></p> <ol style="list-style-type: none"> <li>1. If you have had to repeat steps 1 - 3 three times and blood sugar level remains below please phone your GP or the diabetes centre at West Suffolk Hospital if out of hours phone NHS helpline (111) or emergency services.</li> <li>2. If you become unconscious, you will need immediate emergency treatment. Someone should dial 999 for an ambulance. Glucose treatments should NOT be put in the mouth.</li> </ol>	

### **For further information / support**

If you wish to speak with a diabetes nurse or dietitian, please contact the Diabetes Centre via:

**Phone:** 01284 713311

or

**Email:** [wsh-tr.westsuffolksns@nhs.net](mailto:wsh-tr.westsuffolksns@nhs.net)

**Diabetes care plan for colonoscopy/ sigmoidoscopy/ gastroscopy**  
*(delete as appropriate)*

1. If you currently monitor your blood glucose levels at home, you will need to check your blood glucose levels every 2 to 4 hourly during the preparation for the procedure up until the procedure itself.

2. If you take any oral medications for your diabetes, you may need to adjust or omit the dose:

a) Medication: \_\_\_\_\_

Alterations: \_\_\_\_\_

\_\_\_\_\_

b) Medication: \_\_\_\_\_

Alterations: \_\_\_\_\_

\_\_\_\_\_

c) Medication: \_\_\_\_\_

Alterations: \_\_\_\_\_

\_\_\_\_\_

d) Medication: \_\_\_\_\_

Alterations: \_\_\_\_\_

\_\_\_\_\_

3. If you take any injectable treatment and/or insulin for your diabetes, you may need to adjust or omit the doses:

a) Injectable / insulin: \_\_\_\_\_



Alterations: \_\_\_\_\_  
\_\_\_\_\_

b) Injectable / insulin: \_\_\_\_\_

Alterations: \_\_\_\_\_  
\_\_\_\_\_

c) Injectable / insulin: \_\_\_\_\_

Alterations: \_\_\_\_\_  
\_\_\_\_\_

4. Resume usual blood glucose monitoring and treatment doses after the procedure.

*If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo)*  
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



© West Suffolk NHS Foundation Trust