



Lesson 5

Diabetes and Medication

Materials Needed:

Facilitator-

Participant- Medication barrier cards, insulin handout

GREETING

ASK: Does anyone remember what we talked about last week?

ANSWER: Eating with diabetes

SAY: I'll ask some questions, raise your virtual hand if you'd like to share something with the group.

ASK: The following questions (slide 2) one at a time, allowing participants time to answer:

- Did anyone try out their goal from last week?
- How did it go?
- Did you try anything else new to help manage your diabetes?

SAY: Today we are going to talk about: (slide 3)

- Medications
- Insulin
- Medication Barriers

SAY: For class today you will need the following items from your LYBL tool box.

DO: Hold up items needed by participants.

BLOOD SUGAR MEDICATIONS- LESSON

ASK: What are some medications you take for your diabetes? (Slide 4)

SAY: You can type them in your chat box if you wish- do not worry about spelling! Medications have some wild names! Or you can say them into the mic. Again, don't worry about pronouncing them correctly.

NOTE: The point is not for you to know the medication, but for the audience to hear/see that many people take many different types of medications.

SAY: As you can see, many people take different medications. There are so many different diabetes medications.

ASK: Why do we take medications for diabetes? (Slide 5)

DO: Advance the slide to reveal the answers after people have had an opportunity to guess.

ANSWER: They help us do things like lower our blood sugar, blood pressure, blood cholesterol or manage symptoms of complications.

SAY: Notice how medications help us with our ABCs of diabetes. Again, when our blood sugar, blood pressure and blood cholesterol are in a healthy range, we are at our lowest possible risk of having a diabetes related complication. Many of our medications help keep our ABCs in a healthy range.

SAY: We are going to talk a little bit about medications that help us lower our blood sugar. (Slide 6)

SAY: If you'd like, give me a thumbs up or a hand raise if you take one or more medications to help keep your blood sugar in a healthy range.

ASK: Why might someone take more than one medication to lower blood sugar?

ANSWER: Remember in the first class when talked about 3 problems that can be happening in the body with type 2 diabetes? We can lower our blood sugar by taking medication that helps our cells better use insulin, or we can lower our blood sugar by taking a medication that tells our liver to not put out so much sugar while we sleep, or we can lower our blood sugar by taking a medication that tells our pancreas to push out more insulin. All of these things lower our blood sugar, but in different ways. There are even more ways than this to lower blood sugar! Different medications help with different problems in the body.

SAY: Two people may have different medication plans to lower their blood sugar, because they may have:

- side effects they get from some medications
- another condition, besides diabetes, that makes certain medications a poor choice for them
- or they may have a personal preference for taking a medication

- or another reason!

It can get very complicated! The best thing to know is that there is more than one way to treat diabetes, and your plan is likely to look different than your neighbors. It's important to understand your plan by working with your provider and diabetes educator.

SAY: We are going to review the most common classes of diabetes medications that help a person lower their blood sugar. A class of medications means all the medications all act in a similar way in the body. A class of medications may have one medication in it, or a class of medications may have several different medications in it.

DO: Use Slide 7 and 8 to review each medication class and how it works. The X means it is not typical for the medication. A Check mark means it is a likely outcome.

NOTE: Do not worry if you can't pronounce names. People may recognize their medication in the list. It is also important to know that every medication has two names a generic name and a brand name. I used brand names in the chart.

SAY: In your book, Type 2 Diabetes Basics, you will find more information about different types of diabetes medications on pages 126-131.

ASK: If you have any questions about the medications you take, who can you ask?

ANSWER: your provider, your diabetes educator, your pharmacist

INSULINS- LESSON

ASK: What do you know about insulin? (Slide 9) Think back to the first class.

SAY: Insulin is a hormone our pancreas makes. It allows our cells to use blood glucose for energy. It is necessary for life. Sometimes with diabetes a person must inject synthetic, or man-made, insulin to live (this is the case for type one diabetes). Sometimes a person with diabetes needs to inject synthetic insulin, because their body makes some insulin, but not enough. Remember the second problem in diabetes- our pancreas can get pooped out?

SAY: There are some important things to learn if you take insulin, or if you are about to start taking insulin, such as (Slide 10):

- **The “type” of insulin you will be using** we are going to talk more today **about the different types of insulin**
- **How to inject insulin**
- **When to inject insulin**

- **Syringe or pen?** Many people use pens instead of syringes now. They are easier to carry with you in public. They can also be easier for some people who might have a difficult time drawing up insulin.
- **How food affects blood sugar** we talked about this last week some, but there is plenty more to learn.
- **How to manage a low blood sugar** we talked about this some in the first class, but it is important to refresh your knowledge on this.
- **Who will help you adjust your dosing?** It is unlikely the dose of insulin you start on will stay the same. It will change over time. Will you be adjusting your insulin yourself? Will your provider? You will want to know the answer to this question.

Your diabetes educator or your provider can answer all of these questions for you. Make sure you know all the answers to these questions if you take insulin or if you are going to start taking insulin.

SAY: There are several different types of insulin. (Slide 11)

The things that make each insulin different are three things: 1) How soon they start working 2) When or if they peak and 3) how long they stay around in the body.

SAY: This information about insulin is on a handout. If you take insulin or if you are starting insulin, and you have questions, you can take your handout with you to your healthcare appointment and make sure you get the answers to any of your questions.

SAY: (slide 12) Some insulin works quickly, has a peak and is taken with meals. When an insulin “peaks”, that is the time it is working its hardest. We call shorter acting insulin mealtime insulin or “Bolus” insulin.

SAY: Some longer acting insulin stays in the body as long as 24- 42 hours. It does not peak. If an insulin does not peak it means the insulin is always the same strength. There are not times when the insulin is working harder and there are not times when the insulin is not working as well. This insulin is meant to provide insulin throughout the day and night. It is called background insulin or “basal” insulin.

SAY: (Slide 13) On this slide you can see how the two different types of insulin work in the body. When we eat meals, our blood sugar goes up. A person may take mealtime insulin or bolus insulin at a meal so they have enough insulin when their blood sugar goes up. When we are not eating meals, our blood sugar is steady. A person may take background insulin or basal insulin for when our blood sugar is steady, such as at night or between meals.

SAY: Many people have different insulin schedules. Some people may take insulin a few times a day, some people may take insulin once a day, some people may not take insulin to manage their diabetes. If you don't know what type of insulin you take, or how it works, who can help you?

ANSWER: pharmacist, diabetes educator or provider

NOTE: The next two slides are ONLY for participants to look to see if their insulins are listed, and if they are surprised by how their insulin works. Many people take insulin incorrectly. Not understanding insulin can be life threatening. The point of these next two slides is to get participants asking questions about their insulin, so they better understand their plan.

DO: Show slide 14.

SAY: Notice the insulins on this slide are all mealtime insulins. Look for the three items of importance: 1) When they start working, 2) when they peak and 3) How long they stay in the body. Notice how they are all different.

DO: Show slide 15.

SAY: Notice the insulins on this slide are all background insulins. Focus on the 3 items of importance: 1) When they start working, 2) how they don't peak 3) How long they stay in the body.

ASK: What could happen if you don't understand how your insulin works or when to take it?

ANSWER: Because insulin causes blood sugar to go lower, taking it incorrectly could cause a person to get a dangerous low blood sugar.

OTHER MEDICATIONS PEOPLE WITH DIABETES MAY TAKE (slide 16)

SAY: People with diabetes also may take medications for blood pressure or cholesterol or for another reason. There is good evidence that some blood pressure medications help slow kidney damage. It is also important to remember that heart attack and stroke are the most common complication of diabetes. For that reason, most people with diabetes take medications for cholesterol and blood pressure. There is more information about diabetes medications on page 77 of your book.

ASK: If you have any questions or concerns about medications, who should you ask?

ANSWER: Your diabetes educator or provider.

BARRIERS- ACTIVITY

SAY: Take out your medication barrier card you were mailed. It should look like this-(slide 17)

SAY: Please read your card, or show your card, then state how you can address that barrier. When the person who is holding the card is done talking, invite others to contribute to the conversation.

NOTE: Do not attempt to “solve” problems for people. Let people discuss how they would attempt to address problem. Refer back to medical team for all questions.

Barrier cards include:

- I don't understand why I take a certain medicine**
- I don't know how my insulin works**
- I don't think I need all these medications**
- I don't like the side effects of my new medication**
- I can't keep track of all my pills**
- I don't think the medications are working**
- I take too many medications**
- I think my new medication makes my blood sugar go too low.**
- I don't remember to take my pills**
- I cannot afford my medication**
- I have a hard time getting to the pharmacy**
- I'm afraid of insulin**
- Do I need to test my blood sugar more often with this medication?**
- I often run out of medication before I am able to renew my prescription**

*The “answer” to many of the barriers are to have an honest discussion with your provider or diabetes educator and to get answers to questions. Medication is typically the most effective treatment for diabetes. The most common reasons people “forget” to take their medication, or don't take their medication, is because they don't understand how it works or why they need it.

An important resource for people who may have difficulty affording their medication is www.rassist.org. Familiarize yourself with this resource.

www.Goodrx.com is a website that helps people find the lowest cost prescription in their town.

ONE QUESTION- ACTIVITY

SAY: I'm going to give everyone 1 minute to come up with a question they have about their medications that they would like to ask their provider or diabetes educator about. Write it down. (Slide 18)

DO: Allow participants 1 minute (or two) to come up with a question.

ASK: Who would like to share their question they wrote?

SAY: Sometimes when we see our provider or our educator we forget our questions. Writing our questions down in advance can help us remember what we are having problems with, and help our health care team know how to help us.

SUMMARY (Slides 19 and 20)

DO: Review what was talked about in class today.

GOAL SETTING (slides 21)

DO: Review slide 22 and encourage participants to write one goal down. Allow participants to share goals with each other. If time is limited use chat instead of microphones.

NEXT WEEK:

DO: Show slide 23 to review what will be talked about next week, along with the time and day.

DO: Invite and encourage participants to please fill out end of class evaluation polls.

DO: Thank participants for attending and participating. Let participants know if you had fun and are excited to "see" them next week.