

Diabetes in the Workplace



A Guide for Employers and Employees

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Why are we here today?

- * Overview of diabetes
- * Myths and facts
- * How to handle in the workplace



What is Diabetes?

- * Too much glucose in blood, not enough in body cells
- * Very common condition , but very individualized
- * Usually not a “ visible” disability



Type 1- lack of insulin, insulin producing cells in pancreas have been destroyed

Type 2- body cells resistant to insulin that is being produced

Either way- your body will let you know



Where is it?

- * http://www.youtube.com/watch?v=ae_jC4FDOUc&sns=em
- * Real life examples

Type 1 Diabetes

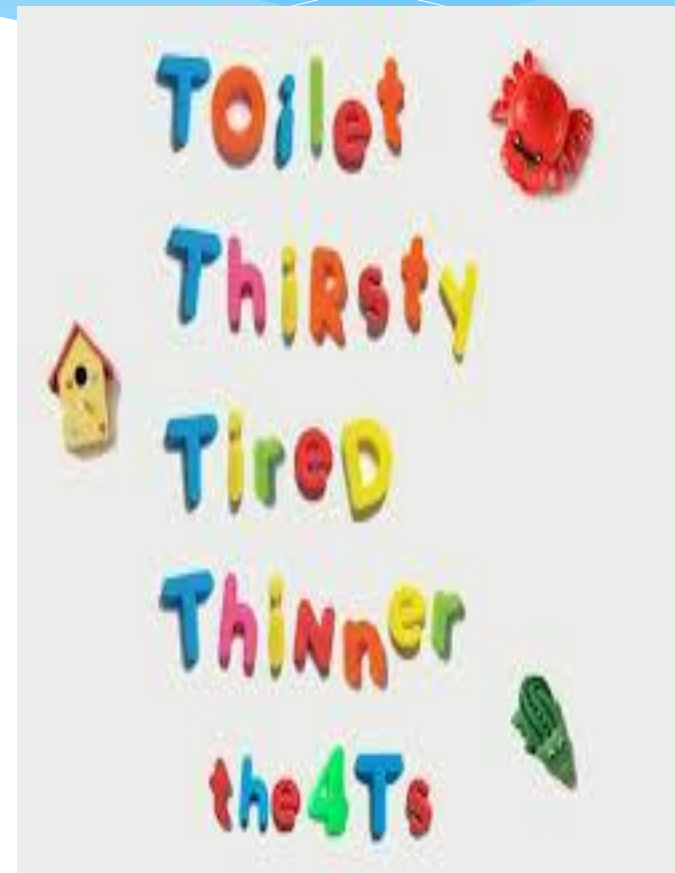
- * Autoimmune disease of insulin producing cells of pancreas
- * Most typical in children and young adults, with sudden onset
- * Must take insulin everyday to survive
- * Can live a very normal life
- * Delicate balance- frequent testing and monitoring to keep blood sugar regular and predictable

Type 2 Diabetes

- * More Gradual, but similar symptoms
- * Risk factors
 - * Obesity
 - * Poor diet
 - * Sedentary lifestyle
- * Increased age- 21% of people over 60
- * Family history and ethnicity

Signs and Symptoms

- * Frequent urination
- * Increased thirst
- * Unplanned weight loss
- * Weakness and fatigue
- * Numbness or tingling of hands and feet
- * Blurred vision
- * Frequent infections



Diabetes by the numbers

- * One out of 4 Canadians, expected to rise to 1/3 by 2020 if trend continues
- * Approximately 9 million Canadians with diabetes- 3 million with diabetes, 6 million with prediabetes

Who's got it?

- * 10% with type 1
- * 90% with Type 2
- * Approximately 87, 000 people in NS
- * Nearly 50% with prediabetes will develop later if lifestyle not modified



Myths and Misgivings

- * Diabetes isn't really a serious disease.
- * People with diabetes can only eat special diabetic foods.
- * Eating too much sugar causes diabetes.
- * All people with diabetes are a safety risk on the job.
- * People with diabetes are always tired and falling asleep on the job.
- * People with diabetes are sick and miss work more often.



Some
people **think**
eating lots of
sugar
causes diabetes.
Now there's a
half-baked
idea.

Mythbusters

- * In Canada- people with diabetes are legally protected from discrimination for employment related.... based on physical disability
- * Human Rights Act, Charter of Rights and Freedoms
- * Yes, must disclose if in a safety sensitive position eg pilot, railway engineer, police
- * No, not eligible in Canadian Armed Forces

Diagnosis

- * Discuss concerns with health professional
- * Blood testing
- * Fasting blood glucose over 7.0 mmol/l
- * A1C , testing of average over 3 month period for measure of control



Treatment

- * Lifestyle counseling
- * Diet control
- * Weight control
- * Exercise
- * Monitoring
- * Insulin by syringe or by pump
- * Medications by pill or tablet





“Control my diet, control my life style, control my carbs... What are you, some kind of freak?”

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Diabetes done right

- * Awareness of own body signs and symptoms
- * Appropriate early diagnosis
- * Lifestyle modifications
- * Well-planned, timed snacks and meals
- * Proper balance of rest and activity
- * Acceptance
- * Self-responsibility
- * Education and awareness of workplace

Diabetes done wrong

- * Secrecy
- * Skipping snacks and meals
- * Rushing through tasks
- * Overexertion
- * Excessive mental stress
- * Lack of sleep
- * Skipping testing and monitoring and meds
- * Serious complications- eyes, heart, kidneys, skin



Nutrition

- * Regular, planned healthy snacks and meals
Don't “forget “ to eat!



Exercise

- * On average, 30 minutes of moderate activity, 5 times a week
- * 1440 minutes in every day
- * Drink up
- * Comfy shoes
- * Check sugar before and after extra strenuous activity



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"What fits your busy schedule better, exercising one hour a day or being dead 24 hours a day?"

Sleep

- * Sleep hygiene
- * Strategic sleep
- * Lighten up on days off
- * Family and friends
- * Move it
- * Shift schedule- fast and forward- day to evening to night
- * Light bright
- * Simple perks



Reasonable Accommodations

- * Snack and meal breaks
- * Safe clean testing and injection area



- * Rest breaks
- * Some autonomy for self-pacing of work
- * Stool or chair for sitting if foot problems

To disclose or no?

- * The good news... you got the job. IT IS YOUR RESPONSIBILITY
 - * TO REQUEST ACCOMMODATION IF NEEDED.
-
- * Used to be a barrier, but not anymore due to better flexibility of of rapid-acting treatment and control
 - * Results in 30 seconds with new devices and pumps
-
- * New long acting insulin types help prevent glucose swings.



Respectful awareness

- * Wear a medic alert bracelet or identification

- * Signs/ symptoms of low blood sugar
- * Hypoglycemia
- * Confusion
- * Shaky, light-headed, anxious
- * Hungry
- * Faster heart rate
- * Sweaty, headachy
- * Weak, drowsy
- * Numbness/ tingling in tongue or lips



Productivity

- * Workers with diabetes tend to take better care of themselves than the “average” worker, due to necessity
- * Provide a fair and equitable opportunity for productive work





Ralph soon encountered one of the undocumented safety hazards of Ed's blood glucose testing.

Driving considerations

- * Fitness of persons with diabetes to drive assessed on case –by-case basis, medically
- * Active role of client- medical records, blood glucose records and well- calibrated monitor
- * Measure blood glucose at least every 4 hours during long drives, not less than 4 mmol/l
- * Carry monitor and easily absorbed carbohydrate, near vehicle visor

Who ? Me, diabetic? HO!HO!HO!





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Schickel

Initial application for commercial license

- * Questionnaire, with emphasis on risk and occurrence of hypoglycemia
- * Medical specialist opinion
- * Proof of attendance at diabetes education program
- * Full eye examination
- * Log of blood glucose measurements at least twice daily over last 6 months

Causes of low blood glucose



- * More physical activity than usual
- * Not eating on time
- * Eating less than necessary
- * Too much medication
- * Effects of drinking alcohol

Treatment of low blood glucose

- * Check level immediately if known diabetic
- * If can't check, treat anyway
- * 15 gram of quick-acting carbohydrate
- * Glucose tablets
- * 3 tsp sugar dissolved in water
- * Cup of regular soft drink
- * 6 life-savers or hard candy
- * 1 tablespoon honey
- * Wait and check again in 15 minutes, then treat again or have snack with protein such as cheese and crackers



TOO HIGH

- * If glucose over 11 mmol/l
- * Thirsty, increased urination, fatigue
- * Adjust monitoring, medication and meal plan
- * Adjust physical activity
- * Consult medical team



Cautions

- * Foot and circulation concerns- steel toed boots, long periods of standing on concrete floor
- * Frequent risk of cuts - prompt treatment
- * Shift work –extra planning and meal preparation, adjusting medications
- * Driving long distance- monitoring glucose



Smoking and Diabetes

- * Smokers have 3 times greater risk of developing diabetes
- * Better A1C over time for non-smokers
- * Improved circulation with less risk of skin complications



Resources

- * Canadian Diabetes Association



- * Free learning series presentation in NS
- * Nsinfo@diabetes.ca
- * www.diabeteshealth.com

Questions? Comments?

THANK YOU!

