

Hyperglycaemia rates in oncology patients receiving systemic anti-cancer therapy (SACT)

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Background:

Hyperglycaemia is a significant cause of morbidity in cancer patients accounting for up to 5% of oncology admissions (Kim, S., 2017). One significant factor is the high doses of steroids administered as part of their anti-emetic regime. There is currently no consensus regarding blood glucose level (BGL) monitoring in patients receiving SACT at the Royal Free Hospital.

Method:

During a three-week period all oncology patients receiving SACT had their blood sugar checked using a capillary blood glucose machine. Blood glucose diagnostic cut off figures were used as per diabetes UK guidelines for normal, borderline diabetic and diabetic values.

Results:

166 patients had their BGL checked during this time period. 18 (11%) had a blood sugar diagnostic of diabetes, 25 (15%) had a borderline blood sugar and 123 (74%) patients had normal blood sugars. In the group with blood sugars diagnostic of diabetes 4 (23%) were NOT known to be diabetic. In the borderline group only 20 (80%) were NOT known to have a pre-existing diagnosis of diabetes. One patient was admitted to hospital as a direct result of the blood sugar measurement.

Conclusion:

43 (25.8%) of patients tested had abnormal blood sugars and all of these patients were receiving steroids as part of their anti-cancer treatment. NICE advocate frequent monitoring of all patients on high dose steroids and we suggest that the routine BGL monitoring of all patients on systemic anti-cancer therapy and early liaison with the local diabetes team could prevent unnecessary admission to hospital.