PT211 Case Discussion – March 17, 2016

Topic: Agents for Diabetes

AC is a 56 year old male who was brought to the UCSF Medical Center ED by his wife after he fainted earlier that afternoon. AC's wife reports that her husband had been tired and weak all morning and that he had been sweating a lot. She also reports that AC was recently started on insulin therapy to try and control his type 2 diabetes. AC was diagnosed with acute hypoglycemia and treated with IV dextrose.

Today the medical team has come to you for advice regarding AC's physical therapy. **They would like to see him become more active in order to help control his diabetes.** As you talk to AC he tells you that he no longer has much feeling in his feet and that sometimes he feels "tingles" in his legs.

Current Medications:

Lantus 10 U SQ QD

Metformin 1000 mg PO BID

Glipizide 5 mg PO TID w/meals

Acetaminophen 325 mg 2 tabs PO PRN HA

Loratadine 10 mg PO QAM

SH: AC is a retired teacher who lives in the Outer Sunset District with his wife. After being diagnosed with type 2 diabetes almost 10 years ago he has tried to change his diet and exercise. But as he has gotten older he has stopped exercising.

Labs:

A1C: 8.5% BP: 157/93 HR: 80 RR: 18

A) For each of AC's diabetes medications, list the generic name, class, and risk of hypoglycemia (low, medium, high)

Generic Name	Drug Class	Hypoglycemia Risk

You schedule AC for out-patient follow-up in the PT Clinic.

B) You ask AC what time he takes his insulin each day. He tells you that he injects his insulin every morning at 10:00AM, just before his breakfast. What would you recommend for AC in terms of timing his physical therapy with his insulin injections? Why?

C) Based on AC's reported symptoms (besides his recent hypoglycemia), what complication of diabetes is he likely experiencing? How will this complication affect AC's physical therapy?

D) While working with AC in clinic (several weeks after the initial episode), he completes the warm-up and aerobic exercises without incident. During the cool-down period, he appears confused. His skin feels cold, clammy, and sweaty. His heart rate is 75 bpm and blood pressure is 137/88. What do you suspect and how should you respond?