Association of Diabetes Nurses

香港糖尿科護士協會通訊
AHKDN Newsletter

Issue 2 Dec 2008

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編者的話 當第一期『香港糖尿科護士協會通訊』推出後，護理同業的反應相當理想，編輯小組仝人在此多謝各位的支持，我們會加倍努力讓『通訊』的內容更豐富。今期的內容包括有『口服糖尿藥物綜覽』，不但扼要地重溫一些常見的口服糖尿藥物，還介紹最新的藥物療法讓大家知多些。個案研討的「眞」、「僞」低血糖則透過一個眞實的個案，展示出臨床上如何使糖尿病患者配合治療以致控制達標的進程。至於糖尿病中心巡禮，今期會介紹東區尤德夫人那打素醫院糖尿病中心，一個成功的例子見證了香港糖尿專科醫療團隊的努力。此外，今期還新加了一個環節AHKDN Chat Corner，希望透過此內容令大家進一步了解我們的協會，並且鼓勵大家可以參加我們的活動；歡迎大家填妥附上的入會表格加入我們這個大家庭!

口服糖尿藥物綜覽

糖尿專科護士陳美娣〔明愛醫院〕

糖尿病在全球的發病率大幅飆升，和人類的飲食文化和生活較舒適富裕有着莫大的關係。根據世界衛生組織的推算，在二零二五年，香港患糖尿病的人口竟達到一百五十萬，是全球其中一個最高發病率的地方。而糖尿病是全港十大殺手病之一，糖尿病和我們的健康息息相關，身爲醫護人員的你，也要懂得健康飲食、適量運動、保持理想體重和心境開朗對減低患上糖尿病有很大的幫助。

糖尿病以2型患者居多，口服降糖藥主要用來醫治2型糖尿病。2型糖尿病的主因，是身體細胞對胰島素的敏感度降低或因胰臟細胞分泌不足夠胰島素，使血糖升高，所以可靠口服藥去刺激胰臟分泌更多胰島素作控制血糖。

最早期的口服降糖藥主要是「磺胺尿素劑」和「雙胍類」。「磺胺尿素劑」作用是刺激胰臟增加胰島素分泌，但也會加重胰臟的負擔，導致胰臟功能加速衰竭。最初有Glibenclamide (Daonil), Tolbutamide (Rastinon); Chlorpropamide (Diabinese); 逐推出第二代如Gliclazide (Diamicron); 較新一代有Glimepiride (Amaryl) 等。

以往一般較瘦或體重正常的糖尿病患者，「磺胺尿素劑」爲第一線藥物，但低血糖反應是這類藥的主要副作用。順帶一提，Oral Hypoglycemic Agent (OHA) 是一般口服降糖藥的統稱，由於其他糖尿藥物如果單一服用，大多不會導致低血糖，所以近年多以Oral Anti-diabetic Drugs (OAD)來代替OHA的統稱. 所以OHA或 OAD 都是口服降糖藥的簡稱。

而對於過重或肥胖的糖尿病患者，除了飲食控制及適量運動外，「雙胍類」Metformin (Glucophage)是醫生的首選。功用主要是抑制肝臟釋放過量的糖份，從以降低血糖。也能增加細胞對胰島素的敏感度，減低身體對胰島素的抗拒。

根據最新海外三個權威協會對於治療2型糖尿病的聯合聲明，儘早使用口服降糖藥，有助控制糖尿，Metformin更被推選爲第一線藥物，如治療的劑量在短期內也不能使糖化血紅素(A1c)降低於7%以下，應輔以其他口服降糖藥，甚至考慮胰島素注射。

「葡萄糖甘酶抑制劑」和「美格替耐類」是繼「磺胺尿素劑」和「雙胍類」之後推出的口服降糖藥。「葡萄糖甘酶抑制劑」如Acarbose (Glucobay)功效是延緩小腸對醣份的吸收，所以適用於餐後血糖過高的病患者。而「美格替耐類」如Repaglinide (Novonorm)，效用雖跟「磺胺尿素劑」相似。但其功效比較迅速及藥力持續性較短，因此低血糖反應較少出現。對於一些難以定時進食的糖尿病患者，「美格替耐類」是治療的新選擇。

近年來，醫學界在研製治療2型糖尿病的藥物上有突破性的發展，其中「二肽基肽酶(DPP-4)抑制劑」及「胰島素增敏劑」爲新一代的糖尿藥。「胰島素增敏劑」如Rosiglitazone (Avandia) 和Pioglitazone (Actos)，它主要是著眼於改善肝臟、肌肉及脂肪組織對胰島素的敏感性，以減少肝臟輸出葡萄糖，增加肌肉及脂肪組織的葡萄糖利用率，當然可以達到降低血糖之目的。服用胰島素增敏劑的病患者，可能出現的副作用如水腫、體重上升等症狀的副作用，而肝臟功能不良及患有心衰竭的病患者不適宜服用此類藥物。

「二肽基肽酶(DPP-4)抑制劑」如Sitagliptin (Januvia)，是美國食品藥物管理局(FDA)核准通過新型第二型糖尿病口服錠劑，這種新藥主要透過提升腸道荷爾蒙GLP水平，以強化身體製造胰島素的能力，進而解決胰島素不足的問題及降低血糖，且可以同時抑制會增加血糖水平的昇糖素分泌。

雖然大部份的2型糖尿病患者，最初可靠口服藥去刺激胰臟分泌更多胰島素來控制血糖，但隨著身體機能開始逐漸減退，或因長時間的消耗，胰臟分泌胰島素能力便會逐漸降低，甚至出現胰島細胞衰竭，更強的口服藥都不能發揮功效，使血糖達至理想的水平，這個時候，便需要由口服藥配合或轉爲注射胰島素，才可有效地控制血糖。

此外糖尿護理教育，在治療糖尿病擔當着一個很重要的角色，除了心靈上的支持，病患者可透過糖尿護理教育，運用正確治理糖尿病的方法和知識去增加自主權，對糖尿長期控制有顯著的效果。

個案研討 -「眞」、「僞」低血糖

糖尿專科護士梁麗儀〔瑪麗醫院〕

陳先生患有糖尿病十多年了，但他一直對糖尿科醫生及護士所建議的治療方法都不大感興趣，還抱着僥倖的心態，以爲糖尿病的併發症未必會發生在他的身上，所以他的平均血糖值 (HbA1c) 時常維持在10%至12%的水平。可是在最近的一次眼底檢測中，醫生發現他患有頗爲嚴重的視網膜病變，由於他也自覺病程不輕，所以立刻嚴格遵從醫生一直以來的指示，努力運動和小心飲食。

可是，當他的血糖由以前的10至20度，下降至接近正常的4至6度左右，他便出現低血糖的徵狀。起初，他還以爲是血糖機的問題，但經過護士爲他做的對比測試，無論血糖機的準確程度與及陳先生的測試步驟，也乎合標準。

經過一連串的努力，依然未見成果，陳先生便絕望地認爲糖尿病是不能控制，最終也難逃併發症的厄運了。

幸好，當陳先生向糖尿科醫生提出他的問題時，醫生便向他解釋。原來，當身體適應了長期高血糖水平，而他突然把血糖水平調控回正常的度數，身體反而未能即時適應過來。醫生建議陳先生只要將生活上的改變按步就班地調校，不宜過於急進，身體便能慢慢適應下來；此外，陳先生亦可以增加自我血糖測試的次數，以便讓醫護人員能更有效地掌握他的病情，作出有效的藥物及飲食調校，糖尿病的病情便能穩定下來。

約三個月之後，在陳先生和醫護人員共同努力下，他的平均血糖值 (HbA1c) 已下降至8.4%，而時常血糖低的感覺，也隨之而消失了。相信只要他能持之以恆，積極參與治療糖尿病，最終一定能戰勝病魔，維持健康的身體呢！

東區尤德夫人那打素醫院糖尿病中心

糖尿專科護士劉秀蓮

東區尤德夫人那打素醫院(簡稱東區醫院)自1993年開院至今已15載了，糖尿科教育服務也在開院早期，因應病人的需要而投入服務，而本人也於1995年開始專責糖尿科教育的工作。

「當年今日」

猶記得早期東區醫院接收了很多普通科門診病人，他們血糖控制欠佳，轉介到東區醫院後，便要重新接受糖尿病教育和重組药物治療。當中不少病人需要接受胰島素注射，但要説服他們自己學習注射，確是難事，因爲他們十分害怕注射，寧願依靠普通科門診護士每天爲他們注射，堅決拒絕學習。

當時急症室接收了不少病人出現糖尿足併發症情況，頓時令骨科病房忙過不了，其後骨科醫生建立糖尿足診所，透過骨科醫生的治療，本人不斷推廣糖尿病教育及足部護理要點，還有足病診療師協助料理足部傷口，約經過兩年時間，糖尿足的個案也明顯下降。

當年社區對糖尿病的認識不多，病人通常在發病後一段時間才會求醫，拖慢了治療的步伐，故此，糖尿科醫生、營養師及本人也頻頻出動到香港大大小小的健康展覽主持講座，希望提高市民對糖尿病的警覺。

「今時今日」

隨著糖尿病人數急速上升，醫院面對服務需求亦隨之而增加，院方亦因應情況，加添了一位糖尿科護士及一位文職同事加入糖尿病中心服務，並於2000年成立了糖尿科護士診所，讓我倆更有系統地接見病人及其照顧者，提供護理評估、教育及跟進工作。護士診所亦於今年通過了醫管局的檢定評審。

朝向協助糖尿病人自助照顧的目標，經過多年來的糖尿病教育和輔導，現時病人都能明白及接受學習自助的常識，不論是飲食原則，注射技巧和血糖監察等等。唯獨是繁忙的都市節奏和緊張的工作壓力，令糖尿病人知易行難！

鑑於糖尿病病發率持續增長，港島東聯網糖尿病及內分泌團隊推廣社區健康教育不遺餘力，主動到不同的機構及學校推廣健康生活的重要，以期望喚起港人注意「糖尿」這個都市病的侵襲。

糖尿病中心亦透過多元化的服務，令糖尿病人得到適切的治療，例如爲病人提供糖尿病併發症檢查，及早發現併發症的情況及加強病人的認知。電話輔導服務以跟進病人匯報血糖情況，怎樣控制飲食和爲他們調較药物的劑量，還有新症病人講座班、病人運動班、病人自助小組等。

期望糖尿病中心前面的工作，以協助糖尿病人將治療原則融合於生活中，控制併發病對生命的威脅！



AHKDN Chat Corner

Maggie Lau (Diabetes Nurse, Prince of Wales Hospital)

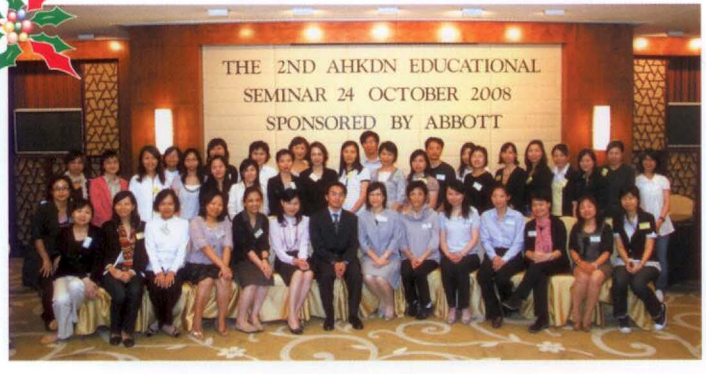
1. CNE provider application

The application for CNE provider by the Hong Kong Nursing Council was submitted in August 2008. It is now in the progress of circulation among committee members of the council.

You may wonder what does it mean?
Once AHKDN is accredited as a CNE provider by the Hong Kong Nursing Council, seminars, workshops or courses organized by the AHKDN will be granted CNE points as determined by the education committee of the AHKDN.

2. AHKDN Educational Seminar

The 2nd AHKDN Seminar on "IDF/WPR Asia-Pacific Diabetes Epidemiology & Education Training Course (APDEC)" and "AHKDN and TADE Exchange Program 2008" was held on October 24th 2008 at Eaton Hotel. A total of 39 participants attended the seminar. It was such a fruitful and enjoyable night that we sat together and shared our diabetes knowledge and experience. On behalf of the AHKDN, we expressed our sincere thanks to the organizer, Ms Holly Tang and the speakers, Ms Shimen Au, Ms Pollyanna Wong, Ms Theresa Yeung and Ms Veronica Hung.



3. The AHKDN Web Site

Have you ever visit the AHKDN

web site http://www.ahkdn.com

The AHKDN web site is currently maintained by no body and linked to other advertisements. If you are an expert or familiar with the setup of web site, don't hesitate to contact us because we do need technical support on this issue.

4. H.A. Patient Empowerment Program

The pilot H.A. patient empowerment program has been conducted in four diabetes centers, which are the Tung Wah East Hospital, the Prince of Wales Hospital, the United Christian Hospital and the Yau Chung Kit Diabetes Assessment Center in August - October 2008. This program includes three sessions and topics include interpretation of complication screening reports, diet, exercise and OADs with emphasis on communication with doctors – how to ask questions correctly. Follow up actions consist of patient focus group and facilitator group discussion run by Professor Ann Shiu. This program is intended to run in primary care settings once it has been well developed.

What's New ?

H. A. Patient Empowerment Commissioned Training Program

Ms Rebecca Wong and Ms Jo Jo Kwan represented us to participate in the organizing committee for H.A. patient empowerment commissioned training program in August 2008. *Please pencil your calendar*: two identical sessions on 16/1/09 evening and 17/1/09 morning were planned. The notable speakers include Ms Martha Funnell from Michigan and Professor Ann Shiu from the Chinese University of Hong Kong. Nevertheless, two local nurses and doctors will be invited to share local experience.

The 3rd AHKDN Seminar

The 3rd AHKDN Seminar on "Sharing on Patient Empowerment Program" will be held on 12th December 2008 in the Kwong Wah Hospital. Do come and join the seminar. Looking forward to seeing you and have a fruitful night together.



ASSOCIATION OF HONG KONG DIABETES NURSES LIMITED

Membership Application Form

Affix a recent photo here

Please ✓ as appropriate

I wish to apply to be an ☐ Ordinary Member ☐ Associate Member ☐ Affiliated Member

of Association of Hong Kong Diabetes Nurses Limited

Surname _____ **Other name** _____ **Chinese name** _____

Correspondence address _____

Tel _____ **(office)** _____ **(mobile)** **Fax** _____ **E-mail** _____

(Must fill in item)

Academic/Professional Qualifications (*in chronological order*)

Year Obtained	Academic / Professional Qualifications	Institution

Relevant Experience (*in chronological order*)

Year	Hospital / Institution	Position	Full time / Part time

I enclosed herewith a crossed checque of HK$650.00, Bank _____ checque no. _____

Signature _____ **Date** _____

Proposer **Name:** _____ **Signature** _____

Please mail the completed application form with a crossed checque payable to "***Association of Hong Kong Diabetes Nurses Limited***" to: Ms Eva Kan, *Secretary of AHKDN (2008-2010) at* Diabetes Care and Education Centre, Alice Ho Miu Ling Nethersole Hospital, 11 Chuen On Road, Tai Po, NT, HK."

The 10 Objectives of AHKDN

1. To act as a professional body representing diabetes nurses in Hong Kong.
2. To promote interests, fraternity and professional growth of diabetes nurses.
3. To promote communication among diabetes nurses and other organizations caring for diabetes patients and their families.
4. To maintain and enhance professional practice standard of diabetes care and education in Hong Kong.
5. To promote a positive professional image of diabetes nurses to the community.
6. To organize conferences, seminars or workshops whether on a global, regional or local basis on subjects relating to diabetes and other chronic diseases.
7. To organize and/or conduct surveys and studies on diabetes and other medical care and education in Hong Kong.
8. To raise money by all lawful means and to solicit, receive and enlist financial and other aid, subscriptions, donations and bequests from individuals, trusts, companies, corporations, associations, societies, institutions and other organizations or authorities, and from Governments, public bodies and to conduct fund-raising campaigns for the purpose of furthering the objects of the Association.
9. To stimulate public interest and provide public education in diabetes and other chronic diseases.
10. To sponsor its members to attend and participate in conferences, seminars, workshops, trainings and other events in Hong Kong or other parts of the world.

Admission Fee and Annual Subscription Fee

Admission fee = HK$500

Annual subscription fee = HK$150

Annual due date = 1st day of April every year. If subsequent annual subscription fee is not received by 30th June, the defaulting member is deemed to have resigned from membership of the Association.

Qualification of Members

1. Ordinary Member

Any Registered Nurses of the Nursing Board of Hong Kong who has completed diabetes care specialty training recognized by the Association and has been engaged in work related to diabetes care, shall be eligible to apply for an ordinary member . Ordinary member shall have the right to vote and to receive notice of all general meetings of the Association..

2. Associate Member

Any Registered / Enrolled Nurses of the Nursing Board of Hong Kong shall be eligible to apply for an associate membership who has the right to receive notice of all general meetings of the Association but have no right to vote or to hold office as a Councillor.

3. Affiliated Member

Any registered medical or paramedical staff who shows interest in diabetes care shall be eligible to apply for an affiliated membership who have the right to receive notice of all general meetings of the Association but have no right to vote or to hold office as a Councillor.

Every candidate for membership of the Association shall be *recommended by at least one Ordinary Member* of the Association. Application for admission must be made in writing signed by the candidate and countersigned by the recommending Ordinary Member and addressed to the Secretary. The Councillors shall have the absolute power to refuse any application for membership without giving any reason therefore.

專業推介 12.2008

Conference / Seminar	Date	Venue	Web-site
1. American Diabetes Association 69th Scientific Sessions	5-9 June, 09	New Orleans, USA	http://scientificsessions.diabetes.org/
2. 36th Annual Meeting of AADE	5-8 August,09	Atlanta, USA	http://www.diabeteseducator.org
3. 20th World Diabetes Congress (IDF)	18-22 October 09	Montreal, Canada	http://www.worlddiabetescongress.org

Course	Commence Date	Web-site
Certificate Course in Obesity and Weight Management (CUHK)	January 2009	http://hkfrdd.org/cowm2009

Journal Article (Oral Anti-Diabetic Drugs)

1. Campbell, R.K. & White, J.R. (2008). More Choices than ever before: Emerging Therapies for Type 2 Diabetes, The Diabetes Educator, 34(3): 518-532.
2. Fowler, M.J. (2007). Diabetes Treatment, Part 2: Oral Agents for Glycemic Management, Clinical Diabetes, 25(4): 131-134.

Updated references list of last issue "Diabetes Hongkong 2005 Position Statements on Diabetes management for healthcare professionals":

- **Diabetes Hongkong. 2005. Position Statements on Diabetes management for healthcare professionals.**
- The Diabetes Control and Complications Trial Research Group. The effect of intensive treatment of diabetes on the development and progression of long-term complications in insulin-dependent diabetes mellitus. N Engl J Med 1993;329: 977-986
- UK Prospective Diabetes Study Group. Effect of intensive blood glucose control with metformin on complications in overweight patients with type 2 diabetes (UKPDS 34). Lancet 1998; 352:854-65
- ADA Position statement. Standards of medical care. Diabetes Care 2005; 28 (Suppl 1) S4-S36
- ADA Position Statement. Tests of glycaemia in diabetes. Diabetes Care 2004; 27 (S1): S91 – S93
  Asian-Pacific Type 2 Diabetes Policy Group. Type 2 diabetes-practical targets and treatments, fourth edition.

