

Older people have a higher risk of hypoglycaemia and poor outcomes due to altered adaptive physiologic responses to low glucose levels. Older persons are sometimes less aware of hypoglycaemia. Dementia and cognitive impairment can further increase the risk of severe hypoglycaemia due to inability to identify or report symptoms to carers. Hypoglycaemia can also trigger or precipitate cardiovascular events, worsen cognitive function, and lead to poor outcomes. Hypoglycaemia can increase the risk of falls and fractures, fear of falling, confusion, delirium and symptoms of fatigue and dizziness.

Treatment in older people

Management of type 2 diabetes in older persons should aim to achieve a good quality of life and avoid diabetes-related

complications. Over-treatment of diabetes in older people should be avoided.

