



## Tips for Managing Complications of Diabetes in Later Life

About one in every four older adults has diabetes—and many also have complications of the disease. ■ If you are 65 or older and have diabetes, here is what you need to know about managing some common complications of diabetes in later life:

### Common Complications

#### High Blood Pressure

High blood pressure (hypertension) is very common in people with diabetes. Older adults who have high blood pressure are at increased risk for strokes and heart attacks. High blood pressure can also affect your vision, kidneys, and circulation.

#### Depression

Older adults with diabetes have an increased risk of depression. Living with diabetes can be demanding and stressful – and that may contribute to depression.

Common signs of depression in older people include:

- Sadness
- Feeling tired often
- Losing interest in things you used to enjoy
- Having sleep problems, either difficulty sleeping or sleeping too much
- Gaining or losing a lot of weight
- Finding it difficult to do things you need to do

#### Falls

Older adults have an increased risk of falls that can cause serious injuries. Having diabetes increases that risk even more, because diabetes can affect your vision, balance, and the feeling in your feet. Older adults with diabetes are more likely to take multiple medications, which can also increase risks of falls.

### What Should You Do?

■ It is very important to have your blood pressure checked regularly. Talk to your healthcare provider about how to lower your blood pressure if it is high.

■ Talk to your healthcare provider if you have symptoms of depression. There are many treatments for depression and your provider can help you find the best choice for you. He or she should see you for a check-up within six weeks of your starting treatment to make sure the treatment is working and does not cause unwanted side effects.

**Because diabetes can increase risk of depression, all older adults should be checked for signs of depression within three months of being diagnosed with diabetes.**

■ If you have had a fall, let your healthcare provider know – even if you did not hurt yourself. That way he or she can figure out what caused the fall and also how you can prevent falls in the future.

## Common Complications

### Urinary Incontinence

Diabetes can cause a loss of bladder control (incontinence) because it damages nerves in the bladder. Those nerves may tell your body that your bladder is full and you need to urinate. Bladder infections are also common in people with diabetes, and can cause urinary incontinence as well.

Urinary incontinence can contribute to depression, sexual problems, and injuries caused by falling while rushing to the bathroom.

### Memory Problems

Older adults with diabetes have a higher risk of memory and thinking problems, called cognitive impairment. This can affect a person's ability to think clearly, recall, remember, and use good judgment, among other things.

### Nerve Pain

Diabetes can cause nerve damage, called neuropathy. Neuropathy can cause burning feelings, tingling, and numbness. It can also limit feeling in your feet and lead to other foot problems such as ulcers. Neuropathy can also lead to continuing (persistent) pain.

### Multiple Medications

Many older adults have several ongoing health problems and take many medications. Prescribing drugs for these older patients can be complicated. Some medicines are helpful for one health problem, but when taken with another medication, may cause harmful side effects.

**Note:** Visit <https://www.healthinaging.org/medications-older-adults/medications-older-adults-should-avoid> for information on medications that may be inappropriate or harmful for certain older people.

## What Should You Do?

■ Many older adults don't tell their healthcare providers that they have urinary incontinence because they're embarrassed. Don't be. Incontinence is a medical condition that responds to treatments, and the sooner you tell your healthcare provider, the sooner he or she can help you.

■ If you feel that you're not thinking as clearly as usual, or are having difficulty remembering things, tell your healthcare professional. He or she can check other tests to see if there is a medical reason for the cognitive changes. Many of these can be treated.

**People with untreated depression often have cognitive problems. It is very important that you are screened for depression if you think there have been changes in your thinking.**

■ You should talk to your healthcare provider about treatments for ongoing pain. When deciding what treatments to recommend, your healthcare provider should consider potential side effects of treatments, your goals of treatment, and possible medication interactions. Better blood sugar control may stop the neuropathy from getting worse.

■ One of the most important things you can do to prevent medication problems is keep a list of all the prescription and over-the-counter medications you take. This list should also include vitamins, herbs, and other supplements you use. You should update this list whenever anything changes, and should share the changes with all of your healthcare providers.