**CASE – Diabetes Mellitus:**

You are a supplementary prescriber working in a diabetes clinic when John Stephens comes in to see you. He is still overweight despite being on the maxi- mum dose of metformin and gliclazide. His HbAlc is 9.0% and on examination he has neuropathy developing in his feet. He is also on ramipril l0 mg, simvas- tatin 40 mg and aspirin 7S mg daily. His blood pressure was l30/80 mmHg and his total cholesterol was 4.0 mmol/L (reading from three months ago). There is no microalbuminuria present.

**Questions:**

1. What are the major signs and symptoms of diabetes mellitus?
2. What is the importance of monitoring renal function in this case?
3. What are the clinical issues for this patient? What leads you to this conclusion?
4. What are the macro vascular and microvascular complications of the condition, and which of them is he exhibiting?
5. What are the treatment goals for John?
6. What is HbA1c and what does this result mean?
7. Assuming the cardiovascular complications are controlled, critically appraise the treatment options available.
8. How should insulin therapy be introduced and give examples of suitable regimens?
9. Is there any drugs available for obesity, mention the major side effects of drugs?
10. What insulin administration devices are there and what different types of insulin are available?
11. Produce a pharmaceutical care plan for this patient and include the goals of therapy.
12. What monitoring does John require?
13. What are the foot care suggestions would you like to give?
14. What is the recommended dietary plan for diabetes patients?
15. Mention the name of drugs which controls the cholesterol level? What are the major side effects of these drugs?