

## International IUD for Health Professionals Clinical Scenario 01 – Thirst and polyuria – Mr Ramny

Mr Simon Ramny, a 50 year-old man, visits Dr Alan Pond, his GP.

ALAN POND: Hello Mr Ramny, I'm Dr Pond.

SIMON RAMNY: Hello Dr Pond. I know I haven't come to see you in years, but I do remember you.

ALAN POND: And what can I do for you today?

SIMON RAMNY: Well, it's a bit embarrassing really. I've come because my wife made the appointment and **I'm not one for** missing appointments. But she **forced my hand**.

ALAN POND: And what is she **worrying** about?

SIMON RAMNY: I – well I've been waking up a lot at night to – it's really **daft** mind you – to go to the bathroom. And my wife says something must be wrong but I don't feel bad at all. I guess maybe I've been drinking more before bedtime so really nothing much to be worried about and I'm sorry to **bother** you about this, but I had to **put my wife at ease** you see.

ALAN POND: I understand and it's quite alright. We'll see if there's anything behind it all. Have you had any temperature?

SIMON RAMNY: Not that I'm aware of, no. Nothing high enough for me to notice.

ALAN POND: Alright well this will be a good way for me to give you a little bit of a general check up as I haven't seen you in a little while. I see in your file the last time you were here was for quite a bad **sore throat** two and a half years ago now. Would you mind if I asked you a few routine questions?

SIMON RAMNY: No, no, go right ahead. I am here, I might as well make good use of the visit mightn't I?

ALAN POND: Good. Are you still taking Ramipril for your blood pressure?

SIMON RAMNY: Yes yes, every day.

ALAN POND: Right, let's check your blood pressure then. Ok please roll up your sleeve. 140/70, that's fine, well **managed** by the medication. Any smoking?

SIMON RAMNY: Ah yes, about 15 cigarettes per day and not **quitting** mind you.

ALAN POND: And how would you evaluate how much you drink? Would you say more than 2 to 4 pints a day?

SIMON RAMNY: I hardly ever drink as I'm a bus driver. I can go a whole week without a drink.

ALAN POND: That's wonderful. Now, would you mind removing your shoes and jacket and stepping on those **scales** for me? Thank you. Now please stand very straight against this wall with your **heels** touching the wall so I can measure you.

ALAN POND: Ok so that is 6 foot 1 and you weigh 17 stones and 6 pounds, which gives a BMI of 32. This means your weight is at a level that puts you at risk for quite a few diseases, like heart disease or diabetes. I really would advise you to **shed 20 pounds** and get down to 16 stones. Now I know it sounds like a lot but any decrease would be good. You could do more exercise for instance.

SIMON RAMNY: Well I do just sit on my **buttocks** for most of the day, if you'll **pardon my French**. I have long shifts.

ALAN POND: I'd strongly encourage you to go for walks in the mornings or evenings and over the weekends, maybe lift some weights at home a few times a week, or do some work around the house or garden – anything that makes you move more really. And, of course, reducing the amounts of fat, salt and sugar in your diet would help. I don't recommend anything dramatic, small changes at a time, so you can **sustain** it for a while.

SIMON RAMNY: Well ok then if it's that simple, I'll tell the wife and see what we can do. Maybe we could fry things a little less often.

ALAN POND: Yes, that's a great start, less frying, more baking and boiling. And you can also add vegetables to your diet and remove chips for example.

SIMON RAMNY: We do eat quite a few potatoes.

ALAN POND: So it's a good opportunity to diversify, add leeks, carrots, peas, salad etc. You'll have to go on making this type of effort for some time but in a few months you should already start to see some results. And I'll see you again in, say 3 months to see how things are going.

SIMON RAMNY: Sounds alright to me. I wouldn't mind having a nice chat about how handsome I look then!

ALAN POND: Now, is there anything other than getting up more at night to go to the bathroom that has been **upsetting** you, even **mildly**?

SIMON RAMNY: Not really no. And I *have* been drinking more water, I know because I always take my water bottle in the bus and it used to be enough but I've been **thirstier** – it's been hot you know – so that's probably explaining the extra bathroom breaks. Though my wife thinks it's

the prostate. Which is silly, nobody in my family has ever had those problems. Other than that, I guess I'm generally a bit tired. Nothing too worrying, I'm no longer 20 you know.

ALAN POND: Right, it might be a good idea to examine your **back passage** for me to check your prostate – don't worry it won't hurt and it'll be very quick. Would you please lie down on the **couch** and relax for me? Ok very good. I don't feel anything out of the ordinary. Alright, you may get dressed. I do think we should run a few blood tests. We'll look at what your prostate has to say to reassure your wife, get a urine **sample** to check for infection, which could cause increased urination, and also run a fasting blood glucose test. I'll write you a **prescription** for these.

*A week later, Simon Ramney returns to get the results of the tests.*

ALAN POND: Hello Mr Ramney, how are you today?

SIMON RAMNEY: Hello doctor. I'm quite good, thank you.

ALAN POND: I have your results here. **PSA** levels are normal, which means your prostate is just fine, and your **MSU** reveals no infection, which is good. But your blood sugar levels are elevated.

SIMON RAMNEY: Ah but you said to reduce sugars last time so we've started with my wife. We don't buy cookies anymore. So the sugar should go down now.

ALAN POND: While it's good news you decided to cut down on sugar, I'm afraid the results of the test are bad news. Do you have any idea what raised blood sugar levels can indicate?

SIMON RAMNEY: No, **beats me**.

ALAN POND: Alright, well if there is too much sugar in your blood, it means it's not being processed adequately by your body. And what helps the body deal with all the sugar is insulin. So high levels of sugar like yours – and 8mmol/l is quite high indeed – probably mean your insulin isn't working well anymore. Do you have any idea what this condition is?

SIMON RAMNEY: Wait I had a colleague, Andy Churr who had to leave work because he had diabetes and he needed to take **shots** of insulin. Is this it? Do I have diabetes?

ALAN POND: Diabetes **basically** means your blood sugar is too high, which is indeed your case. But your colleague probably had type 1 diabetes – the one where you need those shots. I'm pretty sure given your history that you have type 2 diabetes. It's also a problem with insulin and blood sugar but treatment will be different. We will work to eliminate symptoms and to prevent, or at least slow down, the development of complications. You won't have life-long insulin shots. Am I making any sense?

SIMON RAMNEY: Yes I guess so, it's just so sudden, I wasn't expecting to have a disease at all. So, all I have to do is stop eating sugar?

ALAN POND: I'm sorry Mr Ramney but it's not that simple. Diabetes is definitely to be taken seriously. You can suffer from many complications if your blood sugar levels are not taken care of well, like eye and **kidney** disease or blood problems, and also consequences on your nerves and brain. You'll have to see a few doctors as diabetes is best treated by a multidisciplinary team of health professionals, and you'll have to change your lifestyle, not just cut out cookies. I'm very sorry Mr Ramney but this is life-altering news.

SIMON RAMNEY: Oh. I see. I don't really know what to say to that.

ALAN POND: It's perfectly normal **to feel a bit at sea**. This is big news and you need to get used to the idea and fully understand all the implications. It'll take some time.

SIMON RAMNEY: So what do I do now then?

ALAN POND: Well, first we need to treat the symptoms. We can do this with short-term treatment with insulin, again, not for life, or we can use an insulin booster to rapidly **relieve** symptoms. So now we'll decide together which of these **routes** would be best adapted for you. I'll then examine you a bit further and finally I'll give you some information to read quietly at home. We'll schedule an appointment next week for you to come in, with your wife if you'd like, with any question you might have. Does that sound alright?

SIMON RAMNEY: Yes, fine, ok. But I'm not sure I understood everything you just said.

ALAN POND: I'm sorry, we'll take it slowly. Please don't be too **downcast**, diabetes is serious but you can lead a normal life with it. So let's take things one by one.