

Special Issue

Management of the Perioperative Diabetic Patients

Message from the Guest Editors

The association between hyperglycaemia and postoperative complications is firmly established in all surgical patients, including intensive care patients. Guidelines recommend blood glucose to be controlled below 10 mmol/L or even lower down to 7–8 mmol/L. However, implementation of strict perioperative glucose regulation is frequently hindered by low adherence to labour-intensive protocols requiring frequent blood glucose measurements and insulin administrations, as well as the risk of hypoglycaemia. Newer treatment options, like Glucagon-like peptide 1 receptor agonists or sodium-glucose cotransporter-2 inhibitors and others, have been introduced, and have positive effects not only on glycaemic control but also on cardiovascular morbidity. There is need for future research to establish the optimized treatment of the surgical patient in the perioperative period, including a spectrum of patients ranging from ambulatory minor surgery to major abdominal and cardiac surgery along with intensive care treatment. We invite experts in the field and research groups to contribute original research work as well as meaningful reviews to this Special Issue.

Guest Editors

Prof. Dr. Benedikt Preckel

Department of Anesthesiology, Amsterdam University Centers, location AMC, University of Amsterdam, The Netherlands

Dr. Jeroen Hermanides

Department of Anesthesiology, Amsterdam University Centers, location AMC, University of Amsterdam, Amsterdam, The Netherlands

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Journal of Clinical Medicine
Editorial Office
MDPI, Grosspeteranlage 5
4052 Basel, Switzerland
Tel: +41 61 683 77 34
jcm@mdpi.com

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