

Alcohol and Diabetes



Remember that for anyone, alcohol can:

- Affect judgment
- Provide extra calories that can make weight loss or weight management a challenge
- Increase blood pressure and triglycerides
- Contribute to sexual difficulties and inflammation of the pancreas
- Damage your brain, nerves and your liver over time
- Dehydrate the body, which is very dangerous in someone with high blood glucose
- Increase the risk of various cancers over time
- Increase the risk of depression or aggression
- Worsen eye disease

If you consume more than two standard drinks on any one day (weekly up to nine standard drinks for women and up to 14 standard drinks for men), you are strongly advised to reduce the amount of alcohol you drink. Heavy alcohol use can make blood glucose control more difficult and increases other health risks, like cancer.

Be aware of the risks for people with diabetes

- For people using insulin: Delayed hypoglycemia (low blood glucose) can occur up to 24 hours after drinking alcohol.
- For people with type 1 diabetes: There is a risk of morning hypoglycemia if alcohol is consumed two to three hours after the previous evening's meal.

When drinking alcohol, make sure you know how to prevent and treat low blood glucose.

Does having diabetes mean that you can't drink alcohol?

Not necessarily.

As a general rule, there is no need to stop drinking alcohol because you have diabetes. Most people who are managing their diabetes well can safely drink alcohol in moderation: as a general rule, no more than two standard drinks per day with a maximum of up to 14 standard drinks a week for men and up to nine standard drinks for women a week. However, you should speak with your health care team first, especially if any of the following apply to you:

- You have health complications of diabetes such as pancreas or eye disease, high blood pressure or triglycerides, liver problems, nerve damage or stroke.
- You have trouble preventing and treating low blood glucose.

You should not drink alcohol if you:

- Are pregnant or trying to get pregnant;
- Are breastfeeding;
- Have a personal or family history of drinking problems;
- Are planning to drive or engage in other activities that require attention or skill;
- Are taking certain medications. Ask your pharmacist about your medications and possible interactions with alcohol.

For people taking insulin and some medications: Reduce the risk of low blood glucose caused by drinking alcohol by taking the steps outlined on the back of this sheet.

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BEFORE Drinking Alcohol

- Eat regular meals, take your medication(s), and check your blood glucose levels frequently (keep your blood glucose meter with you).
- Always have a treatment for low blood glucose with you (such as three glucose tablets or ¾ cup regular pop or six Life Savers®).
- Wherever you are, make sure the person with you knows your signs and symptoms of low blood glucose, and how to treat it.
- Be aware that glucagon, a treatment for low blood glucose, will not work while alcohol is in the body so make sure that someone knows to call an ambulance if you faint.
- Wear diabetes identification such as a MedicAlert® bracelet or necklace.

WHILE Drinking Alcohol

- Eat carbohydrate-rich foods when drinking alcohol.
- Eat extra carbohydrate-rich foods when physically active.
- Always pour your own drinks. Use less alcohol and dilute your drinks with sugar-free mixes.
- Drink slowly. Make your second drink without alcohol.

AFTER Drinking Alcohol

- Tell a responsible person that you have been drinking. They should look for low blood glucose symptoms.
- Check your blood glucose before going to bed. Eat a carbohydrate snack if your blood glucose is lower than usual.
- Set an alarm or have a responsible person wake you up throughout the night and early morning – a delayed low blood glucose can occur anytime up to 24 hours after drinking alcohol.
- Get up on time the next day for any food, medication or insulin you normally take. Missed medication or insulin can lead to high blood glucose, ketones and diabetic ketoacidosis (DKA).

Carbohydrate and calorie content in some common alcoholic beverages and mixes (amounts listed are a general guide only)

Beverage	Standard serving size	Energy (kcal)	Carbohydrate content (g)
Beer:			
regular	360 mL (12 fl. oz)	140	10
light	360 mL (12 fl. oz)	100	5
non-alcoholic*	360 mL (12 fl. oz)	50-75	11-15
low-carb*	360 mL (12 fl. oz)	90-97	2.5
Spirits/Hard liquor	45 mL (1.5 fl. oz)	98	0
Liqueurs and Cordials	45 mL (1.5 fl. oz)	163-190	17-21
Wine:			
regular	150 mL (5 fl. oz)	102-108	1-2.5
dessert	150 mL (5 fl. oz)	231-243	17-21
non-alcoholic	150 mL (5 fl. oz)	9	1.6
Cooler:			
regular**	360 mL (12 fl. oz)	310	48
light**	360 mL (12 fl. oz)	210	26
Mixes:			
Sugar-free pop	240 mL (8 fl. oz)	2	0.2
Regular pop	240 mL (8 fl. oz)	84-120	22-31
Club soda	240 mL (8 fl. oz)	0	0
Tonic water	240 mL (8 fl. oz)	84	22
Orange juice	240 mL (8 fl. oz)	110	25
Tomato juice	240 mL (8 fl. oz)	41	9
Tomato + clam juice†	240 mL (8 fl. oz)	116	26

Reference: Canadian Nutrient File, 2005 *Actual labels **Manufacturer †USDA, 2004 (Release 17)

For more information, visit Low-Risk Drinking Guidelines at www.lrdg.net

What is a “standard drink”?

One standard drink (13.6 g of alcohol):

Beer: 360 mL (12 fl.oz) of regular strength beer (5% alcohol)

Spirits: 45 mL (1.5 fl.oz) of spirits (40% alcohol)

Wine: 150 mL (5 fl.oz) of wine (12% alcohol)

Note: If you are counting carbohydrates, do not take insulin for the carbohydrate content of alcoholic drinks.

For more information on alcohol and diabetes, watch the “Managing Your Lifestyle” video in this kit. Also, people with diabetes should discuss alcohol use with their diabetes health care providers.



Content taken from the Canadian Diabetes Association's consumer fact sheet, Alcohol and Diabetes.

