

Diabetes mellitus presents complex problem that every doctor meets with during his practice regardless of his specialization. Acute complication can develop also during hospitalization, for example at surgery, neurology, psychiatry and others departments.

We recognize two main groups within acute complications of diabetes mellitus, namely acute metabolic complications and hypoglycaemic syndrome connected with diabetes therapy. Three clinical units belong to acute metabolic complications. They covers diabetic ketoacidosis, hyperglycaemic hyperosmolar syndrome and laktat acidosis.

Lactat acidosis and hyperglycaemic hyperosmolar syndrome are the most important from the view of mortality. Lactat acidosis are uncommon complications in Czech and Slovak republic. It especially appears at diabetics during therapy with biguanids. It can appear also when contraindications with metformin are not respected.

The prevention also includes rational prescription of medicine, for example with respect to their possible interaction with sulfonylureo antidiabetics hypoglycemic influence and self – monitoring of glycaemia at home environment. It is necessary to respect contraindication of individual medicines and prevent polypragmazia. Every doctor, who takes care of diabetics, must find enough time to educate so important possible risk of diabetes cure as is hypoglycemia. The role of doctor, who is also psychologist, is to explain chronically ill patient how to survive the life without the important deficit of life pleasures. Every diabetic must realize that he can not part with this disease till end of his life and he must dominate the disease, the disease must not dominate him.