



DIABETES POLICY

Emergency Treatment

Diabetes Mellitus is a condition in which the amount of glucose (sugar) in the blood is too high because the body cannot use it properly because either not enough or no insulin is produced by the pancreas. There are 2 types of diabetes Type I diabetes is treated by insulin injections, diet and regular physical activity. Type II diabetes develops when the body can still make some insulin, but not enough, or when the insulin that is produced does not work properly (known as insulin resistance). Most children have Type I diabetes.

Hypoglycaemia is the most common short-term complication of diabetes and occurs when blood glucose levels fall below 4mmol/l.

Hypos are more likely to happen towards mealtimes, during or after sessions of increased activity or if a meal or snack has been missed.

Blood glucose levels fall because:

- Too much insulin has been given
- Not enough food, especially carbohydrate, has been eaten
- The child has been more active than usual

How to recognise a hypo

Hypos happen quickly, but most children will have warning signs that will alert them, or people around them, to a hypo. These warning signs can include:

- Hunger
- Trembling or shakiness
- Sweating
- Anxiety or irritability
- Fast pulse or palpitations
- Tingling of the lips
- Glazed eyes
- Pallor

- Mood changes, especially anger or aggressive behaviour
- Lack of concentration
- Vagueness
- Drowsiness

The symptoms can be different for each child and the child's parents/ carers can tell you what their child's warning signs are. These should be noted in the child's treatment plan.

Treating a hypo

It is very important that a hypo is treated quickly. If it is left untreated, the blood glucose level will continue to fall and the child could become unconscious. They should not be left alone during a hypo – nor be sent off to get food to treat it. Recovery treatment must be brought to the child.

Immediate action

Give the child something sugary, to quickly raise the blood glucose level eg

- Lucozade, cola or another (non-diet) drink
- Glucose tablets
- Fresh fruit juice

Follow-up action

Having some starchy food on recovery is important to prevent blood glucose levels falling again eg

- Roll/sandwich
- Fruit
- Cereal bar
- Two biscuits
- A meal, if it is due

If the child still feels hypo after 15 minutes, some more sugary food should be given.

Unconsciousness

- Place the child in the recovery position

- Dial 999 for an ambulance and state that the child has diabetes
- Call the nurse on duty
- Hypostop gel can be rubbed on the gums but do not give anything to eat or drink

Parents of boys with type 1 diabetes can leave a glucagon injection in the medical centre for use if they are suffering from severe hypoglycaemia and are unable to treat themselves.

Glucagon may be given if the patient is:

- Unconscious
- Having a seizure
- Unable to take anything sweet to raise their blood glucose or the patient has taken glucose by mouth which has not produced a raise in their blood glucose level

Recovering from Glucagon

When the patient recovers and is able to take food again, feed them with some quick-acting sugar, such as sweets or fruit juice, and longer acting form of carbohydrate such as bread, crackers or fruit. (<http://www.diabetes.co.uk/diabetes-medication/glucagon-injection-kit.html>)