

# Hypoglycaemia

## Information for Young People

### What is Hypoglycaemia?

Hypoglycaemia (or a 'hypo' as it is usually known) means a low blood glucose level (BGL). Hypoglycaemia occurs when the blood glucose level (BGL) is less than 4mmol/L, or when there are symptoms of a 'hypo' at a level close to this (Ambler, 2001).

### What causes Hypo's

- not enough or missed carbohydrate at meals or snacks (for the dose of insulin taken)
- exercising without eating extra carbohydrate, or exercising without reducing your insulin dose
- having too much insulin for the amount of food eaten
- having too much insulin (either accidentally or dose needs changing)
- when sick and not being able to eat or if unable to keep food down because of vomiting

### How do you feel?

How you feel and behave when you are 'hypo' is different for everyone. Listed are some of the common things you may experience or feel:

- 
- |                  |                |                            |
|------------------|----------------|----------------------------|
| • shakiness      | • palor        | • abdominal pain           |
| • headaches      | • irritability | • inability to concentrate |
| • dizziness      | • hunger       | • aggression               |
| • sweatiness     | • nausea       |                            |
| • blurred vision |                |                            |
- 

### How to treat Hypo's

If you can, it is a good idea to do a BGL if you think you are 'hypo'. If your BGL is less than 4 mmol/L, take some quick acting carbohydrate (glucose) straight away.

After you have treated your 'hypo', wait about 10 minutes for the carbohydrate to work, then do another BG test. If your BGL is still less than 4 mmol/L, then take some more quick -acting carbohydrate.

Continue taking extra carbohydrate until your blood glucose rises above 4mmol/L.

If the 'hypo' has occurred near a snack or a meal then treat the 'hypo' to raise the BGL and then eat your usual meal. If you are not due a meal or snack then, once your BGL is back above 4 mmol/L eat some slower acting carbohydrate such as a grain bread sandwich or a drink of milk and Milo®.

### Examples of some quick-acting carbohydrate

- 100 mls of Lucozade®
- ½ tube of Insta-Glucose® (full tube 30G)
- 120 mls of fruit Juice
- 150 mls of ordinary soft drink
- 2-4 teaspoons of Glucose & Honey mixture (Coles Home brand)
- 7 Jelly Beans

If you have a 'hypo' in the middle of the night, treat the 'hypo' in the usual way and once you feel better and your BGL has come back up, then eat some slow-acting carbohydrate (like a sandwich or milk) to maintain your BGL's until breakfast.

### Tips for Treating 'Hypo's'

Lucozade® is a glucose drink that works really quickly to raise blood glucose levels. It is better for treating 'hypo's' than ordinary soft drink or cordial as you don't need to drink very much. 100mls is all you will need to make you feel better and to bring your BGL back up. Also as it is not 'fizzy' you can drink it really quickly.

One of the problems that happens when you are 'hypo' is that you sometimes keep eating until you feel better. Lucozade® is great because it works so quickly that you don't feel the need to keep eating. This is particularly great if you are worried about gaining weight. You can buy Lucozade® at supermarkets (Coles, Woolworths) and it comes in several flavours and is great to keep in the house for when you need it.

**Note:** Plain Lucozade® (the original) contains less glucose than the flavoured ones.

- Don't forget to always carry some 'hypo' food with you.
- Carbohydrates high in fat e.g. chocolate, are not good for treating 'hypo's' as they work too slowly

For more information on 'hypo's' go to the Queensland Government Diabetes Care Website: Module 5: Hypoglycaemia  
[www.workingwonders.com.au/rchsubsites/diabetes26042005/html/m\\_05..htm](http://www.workingwonders.com.au/rchsubsites/diabetes26042005/html/m_05..htm)

## References

1. Ambler, G., Barron, V., May, C., Ambler, E., Cameron, F., *Caring for Diabetes in Children and Adolescents - A Parent's Manual*. Second Edition, 2001.
2. Stillman, J., Lang, E., Grieve, C., (2003) *Paediatric and Adolescent Diabetes Education Manual*, For Health Professionals. Queensland Health, Queensland Government Publication. Module 5
3. Silink, M., APEG Handbook on Childhood and Adolescent Diabetes. Australasian Paediatric Endocrine Group. Second Edition, 2004