



LOW BLOOD SUGAR

Many people who have diabetes have low blood sugar (hypoglycemia or an insulin reaction) at some time. The following is information about low blood sugar. Most people find this confusing at first so feel free to discuss this with your nurse or physician if you do not completely understand this information. In addition, you should know that some people have only one symptom, some have a few, and some do not have any symptoms. Having no symptoms at all is a dangerous situation. You should always treat low blood sugar levels (less than 70) without experiencing symptoms. Low blood sugar feels different to different people. Learn to recognize your own particular symptoms.

SYMPTOMS

USUAL EARLY SYMPTOMS:

- Hunger
- "Woozy" feeling
- Cold sweat
- Weakness
- Shakiness
- Headache
- "Nervous" feeling
- Irritability
- Numbness of the mouth/lips
- Nightmares, night sweats

USUAL LATER SYMPTOMS:

- Blurred vision
- Restlessness
- Dizziness
- Behavior change
- Personality change
- Mild confusion
- Slurred speech
- Loss of consciousness ("fainting")

CAUSES

- Delayed or skipped meals or snacks
- Not eating enough food at meals or snacks (especially carbohydrates).
- Too much insulin or oral medication
- More exercise than usual
- Drinking alcohol without eating correct type and amount of food.
- Certain medications.



TREATMENT

Whenever possible test your blood sugar. Treatment will depend on your blood sugar level. Guidelines are given for treatment when your blood sugar is less than 60, when it is between 60 - 80 and when it is above 80. Discuss with your physician if these guidelines are appropriate for you.

IF BLOOD SUGAR IS LESS THAN 60,

DRINK OR EAT ONE OF THE FOLLOWING:

- 4 oz. fruit juice
- 4 oz. regular soda
- 4 packs sugar
- 6-7 lifesavers
- 3-4 glucose tablets

If you are unable to eat or drink, an injection of glucagon should be given, and someone should call your local emergency number for help.

NOTE: If you are on PRECOSE or GLYSET, you must treat low blood sugar with GLUCOSE tablets or gel. NOTHING ELSE WILL WORK.



WAIT 10-15 MINUTES THEN TEST AGAIN!

<p>If the result is STILL LESS THAN 60</p> <ul style="list-style-type: none">• Repeat the treatment.• Wait another 10-15 minutes and test again.• Continue this until your blood sugar is over 60.	<p>If the result is BETWEEN 60-80</p> <ul style="list-style-type: none">• DRINK OR EAT <u>ONE</u> OF THE FOLLOWING:<ul style="list-style-type: none">8 oz. milk1 slice of bread6 saltines1 roll3 graham crackers• Wait another 10-15 minutes and test again.• Continue this until blood sugar is over 80.
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Once your sugar is over 80, but if it is more than 1/2 hour until your next meal, have a snack (such as crackers and peanut butter) so your sugar doesn't get too low again.

IF BLOOD SUGAR IS 60-80

DRINK OR EAT ONE OF THE FOLLOWING:

- 8 oz. milk
- 1 slice bread
- 6 saltines
- 1 roll
- 3 graham crackers



NOTE: If you are taking PRECOSE or GLYSET, you must treat low blood sugar with GLUCOSE tablets or gel. NOTHING ELSE WILL WORK.

WAIT 10-15 MINUTES THEN TEST AGAIN!

If the result is **STILL LESS THAN 80**

Repeat the treatment.

Wait 10-15 minutes and re-test.

Continue this until blood sugar is 80.

If the result is over 80, and if it is more than 1/2 hour until your next meal, have a snack (such as crackers and peanut butter) so your sugar doesn't get too low again.

IF YOU HAVE SYMPTOMS BUT YOUR BLOOD SUGAR IS 90 OR ABOVE

- Have a small snack such as crackers or milk.
- Re-check your blood sugar after 20 minutes or so if the symptoms persist.

Sometimes, if your blood sugar changes quickly, you may experience low blood sugar symptoms but still have a normal glucose. If you don't understand this, discuss it with your doctor or diabetes educator.

If you are unable to test your blood sugar, follow the guidelines given for treating low blood sugar when your blood sugar is less than 60.



WHEN TREATING LOW BLOOD SUGAR, MORE IS NOT BETTER

- Do not add sugar to your juice.
- Do wait 10-15 minutes for the treatment to take effect. You will **not** feel better **immediately**; the food or liquid has to be absorbed before it can work.

Do **not** use dietetic candies or diet soda as treatment, they will not work.

NOTE: If you are taking PRECOSE or GLYSET, you must take GLUCOSE tablets or gel.

GLUCAGON

Family and friends should know how to recognize and treat the symptoms of low blood sugar. In addition, someone close to you should know how and when to use **Glucagon**. This is a medication given by injection which will raise your blood sugar. It can be given to you if you are unable to treat yourself. Speak with your Diabetes Educator about this so someone in your family can be taught how to use glucagon.

EMERGENCY INFORMATION

If you are found to be unconscious, and no one is able to give you glucagon, 911 or your local emergency number should be called. Be sure your friends and family members know this.

IF YOU HAVE LOW BLOOD SUGAR FREQUENTLY OR AT THE SAME TIME EACH DAY, SPEAK WITH YOU DOCTOR OR DIABETES EDUCATOR.



PREVENTION OF LOW BLOOD SUGAR

The best treatment for low blood sugar is **prevention**:

1. Measure your insulin carefully and take it on time. Take your oral hypoglycemic medication on time as well.
2. Eat your meals at regular times and find out what to do if a meal will be delayed.
3. Eat all the food groups, especially the carbohydrates, planned for each meal and snack.
4. Snack before and, if needed, during exercise. Your need for a snack will depend on your blood sugar level and the type and duration of exercise.
5. Discuss the use of alcohol with your nurse or physician. If you do drink, always eat something at the same time.
6. Be alert for signs and symptoms of low blood sugar. It is easier to treat if symptoms are noticed early.

IN ADDITION:

1. Always carry a carbohydrate snack.
2. Always wear diabetes identification such as Medic-Alert bracelet or necklace.
3. Carry a cell phone or change with you in case you need to make a telephone call.
4. Educate family members, friends and co-workers on symptoms and treatment for low blood sugar.

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