

## Diabetes - Hypoglycaemia - Paediatric Summary Clinical Guideline

Reference no.: CH CLIN D 05/ May 17/ v008

Children with diabetes may have symptoms of hypoglycaemia at a slightly higher level (<4mmol/l) than the general population (<2mmol/l). Symptoms vary between individuals.

*Treatment: please refer to summary charts in full guideline for the care of children on insulin injection and on insulin pump for further details*

1. If the child is conscious, give sugar or food containing sugar **IMMEDIATELY**,  
If the child is unable to co-operate, but is able to swallow: use Glucogel
2. If child is unconscious then give bolus of iv dextrose if iv access.  
Give 0.5 g/kg of glucose (5mls/kg 10% glucose) intravenously, followed by an infusion of 10% glucose 0.9% saline with 10mmol KCl at maintenance rates until the child is awake and eating. If blood glucose levels drop back down and the child is unable to drink/eat, 10% glucose infusion may be needed.

If there is no immediate venous access, give GLUCAGON: -

- 0.5 mg IM (or SC / IV) for children <25kg
- 1.0 mg IM (or SC / IV) for children >25kg

3. Once their blood sugar is back to normal  
Patients on insulin injections need a carbohydrate containing snack if their next meal is not due.

Patients on insulin pumps will need to bolus insulin with any carbohydrate they eat.

Refer to guideline for [Diabetes - Intercurrent Illness \(Emergency management in children not using insulin pump therapy: CH CLIN D 02\)](#) if the child is hypoglycaemic secondary to illness e.g. gastroenteritis.

Refer to guideline for [Diabetes - Emergency - Insulin Infusion \(CSII\) Pumps \(CH CLIN D 14\)](#) if the child on an insulin pump is hypoglycaemic secondary to illness e.g. gastroenteritis

Discuss any concerns with the Consultant on call. If the consultant on call is still concerned, he/she may contact Dr Tinklin, Dr Smith or Dr Aswani via switchboard. If they are unavailable, use the Paediatric Endocrine rota (copy available in CED or via switchboard, QMC Nottingham).

Fast Acting Carbohydrate requirement	FAST ACTING CARBOHYDRATE GUIDE				
	Glucose tablets	Glucotabs	Lucozade (3 years and over)	Glucosjuice (under 3 years)	Glucogel
3g	1	1	40ml *	12ml	-
6g	2	1½	70ml *	25ml	-
9g	3	2½	110ml *	35ml	1 tube
12g	4	3	140ml *	50ml	1 tube
18g	6	4½	210ml *	70ml	2 tubes

\*PLEASE NOTE THAT THESE VOLUMES OF LUCOZADE ASSUME THE NEW FORMULATION RETAILED FROM 1<sup>ST</sup> APRIL 2017. CHECK LABELS CAREFULLY, AS THE OUTWARD PACKAGING IS VERY SIMILAR AND THERE MAY BE A DELAY IN NEW STOCK ARRIVING. THE NEW FORMULATION CONTAINS 8.9g CARBOHYDRATE PER 100ml. IF ONLY OLD STOCK AVAILABLE ( 17g per 100ml, THEN HALVE THE VOLUMES LISTED)

# LUCOZADE ENERGY IS CHANGING



Lucozade Energy Original now contains approximately 50% less glucose based carbohydrates. All flavours have significantly less glucose based carbohydrates - please check the label.

New products will appear on shelf from April 2017, for a time old and new bottles and cans may be on shelf together so remember to check the label for the amount of glucose based carbohydrates.

This applies to all Lucozade Energy flavours.  
People with diabetes please consult your health professional.

## NUTRITIONAL INFORMATION

Typical values	100ml	380ml
Energy: kJ / kcal	158 / 37	600 / 141
Carbohydrate, g	8.9	33.8
of which sugars, g	4.5	17.1
Salt, g	0.08	0.31

Contains negligible amounts of – Fat, Saturates and Protein.

Contains 8.9g glucose based carbohydrate per 100ml and 33.8g per 380ml bottle.

\*Reference intake of an average adult (8400kJ/2000kcal)

FOR PRODUCT INFORMATION PLEASE VISIT: [WWW.LRSUNTORY.COM/HEALTH](http://WWW.LRSUNTORY.COM/HEALTH)  
OR CONTACT CONSUMER CARE ON 1800 989488

