

356 Hypoglycemia (ALL)

Description

- Low blood sugar, complication of diabetes or other condition, such as in early pregnancy, prolonged fasting, strenuous exercise or SGA infants
- Managed by frequent meals, support growth, balanced diet, low carbohydrates and exercise

Assess Readiness for Change: with open ended questions

- “What is the cause of your hypoglycemia; diabetes or some other condition?”
- “What did the Dr tell you to do to treat your hypoglycemia?”

Discussion, Counseling and Education

If the answer is:	Try Counseling Strategies	Try Education
<p>Not ready →</p> <p>“I don’t have diabetes. I just need to eat more often, I can’t get too hungry.”</p> <p>Raise awareness & personalize change</p> <p>Record Plan or Goal</p>	<ul style="list-style-type: none"> • “Tell me more about how you keep your blood sugar from getting to low?” • “How do you feel you are managing your hypoglycemia?” 	<ul style="list-style-type: none"> • “You are eligible for WIC because you have hypoglycemia. Would you be interested in some information on preventing low blood sugar?” • Offer feeding suggestions for disease/condition • Not high risk but refer to RD if above comfort level
<p>Unsure →</p> <p>“It seems to be ok. I have some sugar when I feel shaky?”</p> <p>Raise awareness & confidence & identify barriers to change</p> <p>Record Plan or Goal</p>	<ul style="list-style-type: none"> • “That is good. When you have symptoms, ½ cup juice is a good choice. How often do you have symptoms?” • “On a scale of 1-10, how worried are you about your hypoglycemia?” • “What other changes do you think you should make?” • <i>Knowledge: low blood sugar, commonly a side effect of diabetes, for a non-diabetic some causes still debated, may be related to medicine, disease, hormones, tumor; symptoms hunger, shaky, nervous, sweating</i> 	<ul style="list-style-type: none"> • Treatment if diabetic; control diabetes: <ul style="list-style-type: none"> ○ Take meds ○ Don’t skip meals ○ Food in relation to insulin/meds ○ Limit alcohol ○ Limit strenuous activity • Treatment if no underlying condition: <ul style="list-style-type: none"> ○ Small frequent meals ○ Healthy diet, variety & fiber ○ Be active ○ Limit high sugar foods ○ Infant/child small freq feeds to support growth
<p>Ready →</p> <p>“I feel funny more often than I think I should so there must be something else to do?”</p> <p>Help plan change-support</p> <p>Record Plan or Goal</p>	<ul style="list-style-type: none"> • “When do you usually have symptoms? Have you noticed any pattern?” • “How often do you eat?” 	<ul style="list-style-type: none"> • “It sounds like you like sweets. If you have to have sweets, it helps to include them with meals rather than having them on an empty stomach.”

Not ready →

“I don’t have diabetes. I just need to eat more often, I can’t get too hungry.”

Raise awareness & personalize change

Record Plan or Goal

Try Counseling Strategies

- “Tell me more about how you keep your blood sugar from getting to low?”
- “How do you feel you are managing your hypoglycemia?”

Try Education

- “You are eligible for WIC because you have hypoglycemia. Would you be interested in some information on preventing low blood sugar?”
- Offer feeding suggestions for disease/condition
- Not high risk but refer to RD if above comfort level

Record Plan or Goal Mom feels she is in control of hypoglycemia. Will re-assess next appointment.

Unsure →

“It seems to be ok. I have some sugar when I feel shaky?”

Raise awareness & confidence & identify barriers to change

Record Plan or Goal

Try Counseling Strategies

- “That is good. When you have symptoms, ½ cup juice is a good choice. How often do you have symptoms?”
- “On a scale of 1-10, how worried are you about your hypoglycemia?”
- “What other changes do you think you should make?”
- *Knowledge: low blood sugar, commonly a side effect of diabetes, for a non-diabetic some causes still debated, may be related to medicine, disease, hormones, tumor; symptoms hunger, shaky, nervous, sweating*

Try Education

- Treatment if diabetic; control diabetes:
 - Take meds
 - Don’t skip meals
 - Food in relation to insulin/meds
 - Limit alcohol
 - Limit strenuous activity
- Treatment if no underlying condition:
 - Small frequent meals
 - Healthy diet, variety & fiber
 - Be active
 - Limit high sugar foods
 - Infant/child small freq feeds to support growth

Record Plan or Goal Mom states knows should not skip meals. Plans to try to have consistent meals. Re-asses next appointment.

Ready →

“I feel funny more often than I think I should so there must be something else to do?”

Help plan change-support

Record Plan or Goal

Try Counseling Strategies

- “When do you usually have symptoms? Have you noticed any pattern?”
- “How often do you eat?”

Try Education

- “It sounds like you like sweets. If you have to have sweets, it helps to include them with meals rather than having them on an empty stomach.”

Record Plan or Goal Mom having sweets daily. To limit to mealtime. Follow-up control next appointment.

Education Resources <http://diabetes.niddk.nih.gov/dm/pubs/hypoglycemia/> Resource- *Hypoglycemia*
<http://www.nlm.nih.gov/medlineplus/tutorials/hypoglycemia/htm/index.htm> Resource- *Hypoglycemia Interactive Tutorial*