

Do you have diabetes?



Are you being treated with insulin?

Are you being treated with glucose lowering tablets called sulphonylureas? (ask your pharmacist)

Have you experienced any of the following symptoms during the day or night?

Hypo symptoms

- Unsettled / feeling 'off'
- Hungry
- Sweating
- Dizzy
- Shaking
- Irritable
- Confused
- Cold
- Faint

Night time hypos

- Morning headache
- Poor sleep
- Tiredness
- Vivid dreams or nightmares
- Night sweats

You could be experiencing hypoglycaemia or 'hypos' (low blood glucose).

Reduce your risk and *TALK Hypos* with your diabetes team today.



SIMONE LENSBØL
Denmark
Simone has type 2 diabetes



JACK EDWARDS
Australia
Jack has type 1 diabetes



YASMIN FIEDLER
Germany
Yasmin has type 1 diabetes



HUW BEVAN
UK
Huw has type 2 diabetes

TALK HYPOS IS AN AWARENESS CAMPAIGN FROM NOVO NORDISK
SUPPORTED BY DIABETES IRELAND



What are hypos (hypoglycaemia)?

- Hypos are when glucose (also called sugars) in the blood falls to a low level below 4.0 mmol/L, whether or not you feel it



What causes hypos?

- If your diabetes is being treated by insulin or tablets called sulphonylureas (SU's) you might experience a hypo because of: taking too much insulin, delayed missed meals, not eating enough food containing carbohydrate (eg. bread, pasta, cereals), alcohol, recreational drugs, exercising more than usual (a hypo can occur up to 24 hrs after vigorous exercise), hot weather, breastfeeding or vomiting just after a meal. Sometimes there is no obvious reason
- Talk to your diabetes team about what can cause you to have a hypo

What are the symptoms?

- Hypo symptoms are different for everyone, but they can include: trembling, feeling dizzy, sweaty, hungry, faint, cold, tired, irritable, blurred vision, confused or having difficulty concentrating
- Hypos can be mild or severe. Symptoms of a severe hypo can include: slurred speech, glazed eyes, poor co-ordination, inappropriate behaviour, you may appear drunk when you are not, seizures and loss of consciousness
- Hypo symptoms may be recognised by your family, friends or people at work, so it is important to talk to them about hypos and how they can help

If you feel unwell check your blood glucose and if it's below 4.0 mmol/L you are having a hypo

Why TALK Hypos?

- Hypos are common and for some people with diabetes a fear of hypos is a big concern
- Despite this, research shows that people with diabetes don't always talk about hypos with their diabetes team
- Having repeated hypos can lead to **'hypo unawareness'** over time. This means that the warning symptoms of a hypo stop being felt, making them harder to identify and more difficult to manage

What are night-time hypos?'1

- Night-time hypos are also caused by a fall in glucose levels and occur when a person is asleep
- They can be a particular concern for people with diabetes as they are unpredictable and hard to detect
- The symptoms of night-time hypos can include: waking up with a headache, poor sleep, tiredness, night sweats and having vivid dreams or nightmares
- Undetected night time hypos can also lead to the development of **'hypo unawareness'**
- Night-time hypos can have an impact on the day-to-day lives of people with diabetes and can lead to days missed from school or work, or less interest in exercise and meeting friends

Steps to be taken to reduce the risk of hypos

Test your blood glucose levels regularly, do not delay in treating your hypo, always carry food or drink containing sugar (such as glucose tablets or a non-diet fizzy drink), carry a diabetes ID card or bracelet, try not to skip meals, take diabetes medication correctly, be extra careful when drinking alcohol and visit your diabetes team regularly to check your diabetes and medication



TALK
hypos
DAY AND NIGHT

MORGANNE SHONE
UK
Morganne has type 1 diabetes

Hypos and driving



- Always check your blood glucose level before driving - do not drive without eating if your blood glucose is below 5.0 mmol/L
- Always carry glucose in your car for emergencies
- If you have a hypo while driving, stop when it is safe to do so, remove your keys from the ignition and remove yourself from the driving seat
- Do not drive for 45 minutes after having a hypo
- On long journeys stop regularly, at least every 2 hours, to check your blood glucose levels
- You must inform your insurance company and the driving licence authority that you have diabetes and are taking insulin or sulphonylurea tablets
- Be familiar with the Road Safety Authority Guidelines on driving with diabetes
- You should not drive if you have **'hypo unawareness'**
- Ask your diabetes team for more information

It's time to **TALK Hypos**



THINK

Do you know what a hypo is?
Do you suffer from hypos?



ASK

your diabetes team about hypos and discuss them in your next visit



LEARN

what can be done to better manage your hypos, including lifestyle and treatment options



KEEP

track of your hypos for discussion with your diabetes team

How to treat a day or night-time hypo

- Do not delay in treating your hypo. Ask for help as soon as you can if you need it
- Take some sugary food or drink as quickly as possible if you are conscious and can safely swallow. Try to take 15g of fast acting carbohydrate (unless instructed otherwise).

The following are good options to treat a mild hypo:

- 5 glucose tablets
- 1 or 2 tubes of a glucose gel such as GlucoGel®*
- 150 mL of fruit juice
- 60 mL Lift® (previously known as GlucoJuice)*
- 150 mL of a sugary fizzy drink (eg. non-diet cola or lemonade)



Note: brands of fizzy drinks may change their sugar content so check the labels regularly to ensure you are getting the correct amount of carbohydrate.

- Re-check your blood glucose levels after 10–15 minutes and re-treat as above if your blood glucose levels are still less than 4.0 mmol/L. If you are starting to feel better, eat your meal if due or have a small carbohydrate snack e.g. slice of bread or piece of fruit
- If you wake up and believe you have had a night-time hypo, the best way to confirm this is to check your blood glucose levels. If you are having a hypo, then treat it as described above
- Talk to your family and friends in advance about what could happen if your blood sugar goes low and in particular how they can help you if you have a severe hypo. **If you have a severe hypo and are unconscious those around you will need to do the following:**
 - do not give you anything by mouth as you may choke
 - place you in the recovery position
 - inject you with glucagon which will temporarily raise your blood glucose levels
 - if glucagon is not available call 112/999 immediately (112 is the emergency number for Europe. Please consult local authorities if residing outside Europe)
- For full information about managing and avoiding day and night-time hypos, talk to your diabetes team at your next appointment

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Further information is available from:

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Reference 1. <https://www.diabetes.ie/living-with-diabetes/living-type-1/talkhypos/>



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