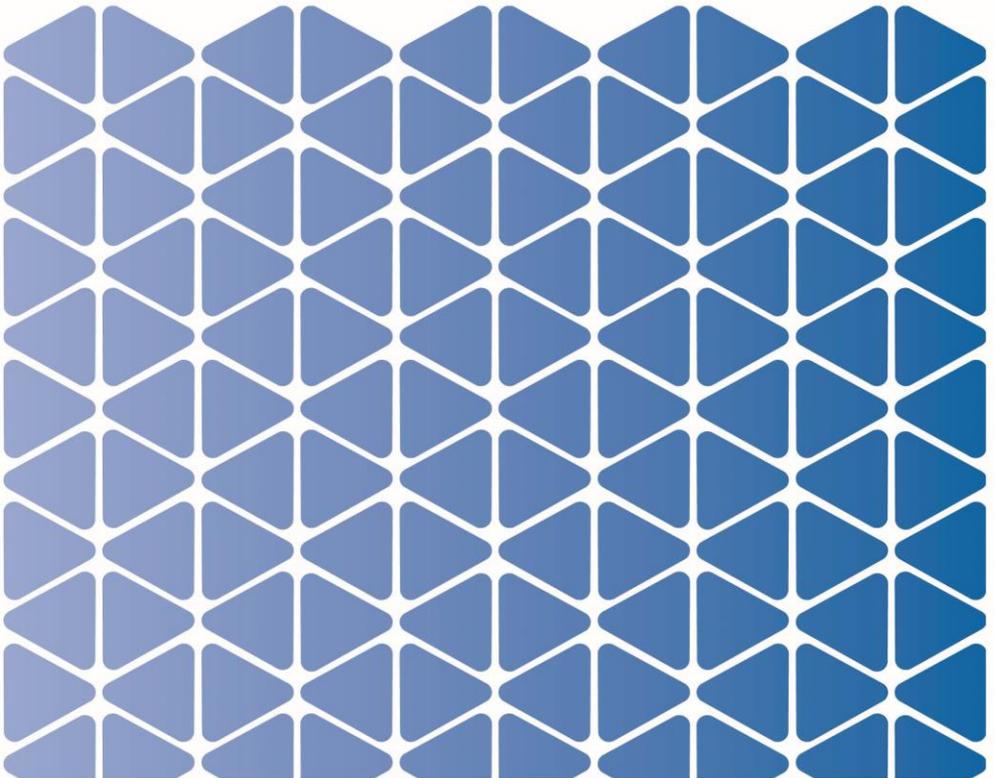




PATIENT INFORMATION

PROTECTING YOUR BABY FROM LOW BLOOD GLUCOSE



Which babies are at risk of low blood glucose?

Babies who are small, premature, unwell at birth, whose mothers are diabetic or have taken blood pressure medication are at risk of low blood glucose. This is sometimes called low blood sugar or hypoglycaemia. If your baby is in one of these at risk groups it is recommended they have blood tests to check their blood glucose level.

Before baby is born

If you know your baby will have risk factors for low blood glucose you can help to prevent this occurring. You can express your breast milk before your baby is born from 36 – 37 weeks of pregnancy. Giving this milk to your baby in the early days of birth may reduce the risk of low blood glucose. If you would like to try this speak to your midwife.

If low blood glucose is identified quickly, it can be treated quickly to avoid harm to your baby. If extremely low blood glucose is not treated it can cause brain injury and developmental delay.

- Your baby's blood glucose is tested with a small heel prick blood test and you will know the result straight away
- The first test should be carried out before baby's second feed (2 - 4 hours after birth), the test is repeated until the results are stable. The tests can be carried out while holding your baby in skin to skin contact to provide comfort and pain relief.
- You and your baby will need to stay in hospital until the results are stable, usually around 24 - 48 hours

How to help avoid low blood glucose

1. Keep baby warm

Skin-to-skin contact keeps baby warm, stable and helps baby establish breastfeeding. Keep baby chest-to-chest and cover exposed skin with a blanket. A red blanket will be used to identify that your baby is at risk. This alerts staff at a glance that your baby is in a high risk group

2. Early and regular feeding

Feed as soon as possible after birth and at least once in the first hour of birth. Feed when baby shows "cues" but avoid going longer than 3 hours between feeds until blood glucose is stable

What if my baby does not want to feed?

If your baby struggles to feed let staff know and they will support you to feed your baby.

If you are breastfeeding the midwifery staff will support you to express your breast-milk by hand and give it to your baby straight away using a spoon or baby feeding cup.

If you are worried your baby is unwell

If your baby appears unwell, it may be a sign of low blood glucose. It is important you tell a health professional if you are concerned there is something wrong with your baby, as parents' instincts are often correct.

- In hospital tell a member of staff
- At home, call your Community Midwife and ask for an urgent visit or advice
- Out-of-hours, call NHS 111
- If you are really worried call 999 or take your baby to your nearest A&E.

Signs your baby is well

Is your baby feeding well?

Babies at risk of low blood glucose should feed effectively at least every 2- 3 hours until blood glucose levels are stable. Ask a member of staff to check baby is attached effectively at the breast or, if formula feeding how much formula they should be taking. If your baby becomes less interested in feeding than before this may be a sign they are unwell and you should speak to a member of staff.

Is your baby warm enough?

Your baby's body should feel warm, although their hands and feet may still feel a little cooler. A baby's temperature should be between 36.5°C – 37.5°C.

Is your baby responding to you?

When your baby is awake they should look at you and pay attention and if you try and wake them they should rouse and respond.

Is baby's muscle tone normal?

A sleeping baby is very relaxed, but should still have muscle tone and respond to touch. If your baby feels completely floppy or is making strong, repeated jerky movements, this is a sign they maybe unwell. Light, brief 'startle' movements are normal. Ask a member of staff if you are unsure about baby's movements.

Is your baby's colour normal?

Look at baby's lips and tongue-they should be pink.

Is your baby breathing easily?

A baby's tummy moves when they breathe and their breathing can be irregular with pauses followed by a few seconds of fast breathing. BUT if the breathing is faster than 60 breaths per minute or they seem to be struggling to breathe (making noises with each breath out, deep chest movements or flaring nostrils) this is not normal.

What happens if baby's blood glucose is low?

- If the blood test shows the baby's blood sugar is low: We will assist you feed your baby as soon as possible and encourage you hold baby skin-to-skin contact between feeds to keep baby warm and stable
- Your baby may be prescribed a dose of dextrose (sugar) gel to be given as well as a feed to help improve the blood glucose
- In some cases if the blood glucose is very low and it does not improve after feeding and treatment with dextrose gel or baby does not feed they may need to go to the neonatal unit for treatment. Parents have 24 hour access to their baby on neonatal unit and will be supported to continue feeding, expressing milk and having skin-to-skin contact while baby is on the uni
- In most cases low blood glucose improves in 24 - 48 hours

Going home with baby

Once your baby's blood glucose is stable and he/she is feeding well, you will be able to go home. Your baby's feeding behaviours, nappies and weight gain will tell you if baby is feeding well. If you have any concerns about your baby's feeding speak to a midwife.

Reference: The British Association of Perinatal Medicine (BAPM) Identification and Management of Neonatal Hypoglycaemia in the Full Term Infant. Framework for Practice (April 2017) available at www.bapm.org

If symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999 via the main hospital switchboard for advice.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PET@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.