

THE SOCIETY OF SPORTS THERAPISTS



Sports Trauma Management

9. Exposure, Environment & Everything Else

c. Medical Emergencies

ii. Hypoglycaemia

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The Society of Sports Therapists

Hypoglycaemia

- Plasma Glucose $<2.5\text{mmol/L}$ (BM) but Sx present before this
- Rapid onset of Sx (minutes)
- Neuroglycopenia
 - Confusion, seizure, aggression, hunger, lethargy, coma
- Autonomic Dysfunction
 - Sweating, tachycardia ($+100\text{Bpm}$), pallor, vomiting





Hypoglycaemia Management

- ABC **DEFG**
- **Don't Ever Forget Glucose**
- Get a BM reading if able, but do not delay Rx
- **IF CONSCIOUS**
 - Give oral/buccal glucose
 - Energy or soft drink, sweets, jam, sugar
 - 10-20gms glucose orally in solution



Hypoglycaemia Management

- **IF UNCONCIOUS**
 - Give O₂
 - IM Glucagon 1mg
 - OR
 - IV 5mls/kg 10% dextrose
 - OR
 - Hypostop
 - OR
 - Buccal options of energy gel, sugar, jam



Hypoglycaemia Management

- Re-Evaluate
 - Recovery/improvement within minutes
- Refer
 - To ED if in doubt
- NB: Low sugar is more dangerous than High