

## Hypoglycaemia

Hypoglycaemia is when your blood glucose is less than 3.5 mmol/L. It can be caused by giving too much insulin, missing a meal, exercise or by drinking alcohol (not recommended).

If your blood glucose is less than 3.5 mmol/L you may feel:

- Faint
- Dizzy
- Headachy
- Sweaty
- Confused
- Irritable

You must treat a blood glucose less than 3.5 mmol/L immediately (see treatment chart).

Contact your Diabetes Midwife Coordinator or your lead maternity carer (LMC) if you have any concerns.

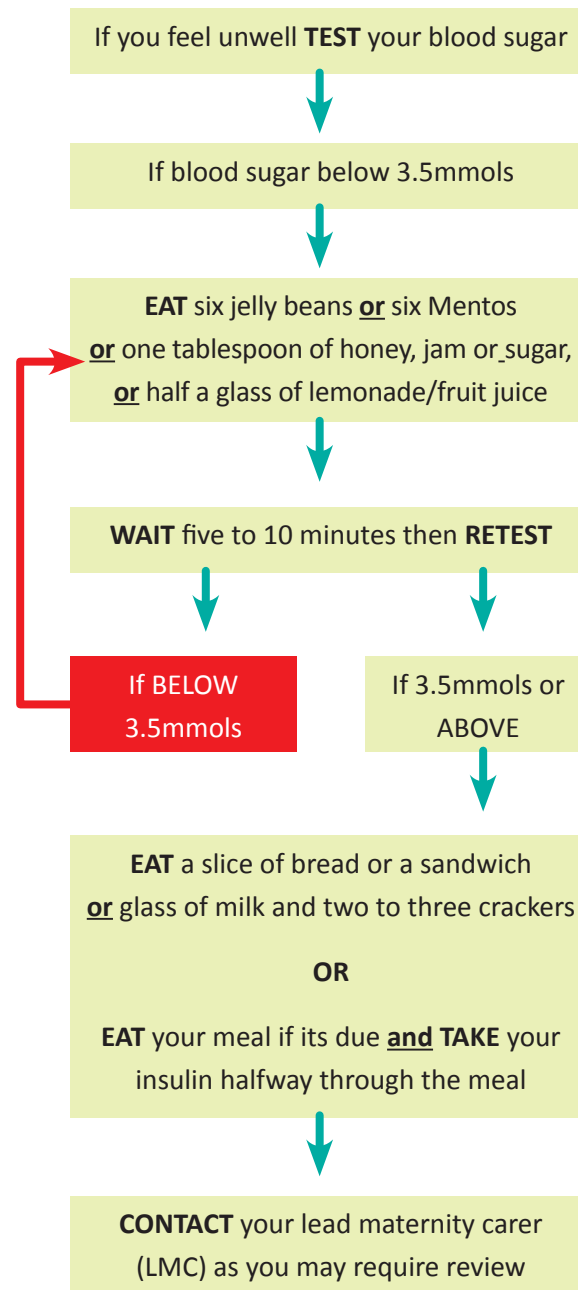
### For after hours support:

Please contact either your LMC *or*

**Waitakere Maternity** – (09) 837 6605

**North Shore Maternity** – (09) 486 8915

## Hypoglycaemia Treatment



# Insulin treatment in pregnancy

*Information you need to know*

Having insulin injections will help your body control your blood glucose, leading to a safer pregnancy for you and your baby.

## What is my blood sugar goal?

Before breakfast:

.....

2 hours after a meal:

.....

## Types of insulin

There are two types of insulin that we commonly use:

**Novorapid** (clear) insulin works quickly and is your meal time insulin. You inject this at the start of your main meals.

**Protaphane** (cloudy) insulin works slowly and lasts overnight. You inject this at night before bed.

## How to store your insulin

You can keep the insulin pen you are currently using at room temperature. Avoid leaving it the sun or in particularly hot or cold places. You should keep your spare insulin in the refrigerator.

## Your insulin and when to take it

Insulin	Breakfast	Lunch	Evening Meal	Bedtime

## Step by step instructions

Before starting, always check you have the correct insulin and it is NOT expired

- PEN:** Open a new needle and attach it to your insulin pen before the first injection of the day
- MIX:** If your insulin is cloudy it will need to be mixed. Do this by gently rotating the pen up and down at least 20 times until the insulin is evenly mixed
- PRIME:** Remove the needle cap. Dial up 2 units and press the plunger, checking to see if insulin flows from the tip of the needle. Repeat until insulin appears
- INJECT:** Dial up your insulin dose and inject. After pushing the plunger to completely deliver the insulin, leave the needle in your skin for a count of 10 before withdrawing it.  
*It is important to change where you inject your insulin each time. This will help to ensure your insulin is absorbed properly.*
- RECAP:** Recap your needle. After your last insulin dose of the day, remove the needle from your pen and dispose of it into a sealed container. Your pharmacy will advise you of safe disposal.



*Change your insulin cartridge or disposable pen every month (if not already used within that time).*

*Change your insulin needles ideally every day or at least every 3rd injection.*