

A model for reducing severe hypoglycemia risk – diabetes in pregnancy

Although most pregnant women with type 1 diabetes aim for and often meet glucose targets close to normal throughout their pregnancy, these patients have a high risk of severe hypoglycemic episodes that can lead to severe morbidity and occasional mortality of the fetus. Indeed, the frequency distribution of severe hypoglycemia is highly skewed, with 10% of pregnant women accounting for 60% of all recorded events. Diabetes in pregnancy provides a real-life model of tight glycaemic control which can provide clinical information useful for developing approaches to reduce the risk of hypoglycemia more generally.

In the latest issue of *Diabetic Hypoglycemia*, Dr Lene Ringholm and colleagues discuss the clinical features and management of severe hypoglycemia in pregnant women with type 1 diabetes. They conclude that episodes of severe hypoglycemia during pregnancy may be reduced if these patients undergo pre-conception counseling on the risks of developing severe hypoglycemia during pregnancy, training on hypoglycemia awareness and treatment with insulin analogs and/or an insulin pump with real-time continuous glucose monitoring plus hypoglycemia alarms. Professor Simon Heller's related Editorial also points out that women with type 1 diabetes who start intensive glucose control before or during pregnancy should be advised on the importance of testing blood glucose before driving and should ensure their partners are educated on how to administer glucagon if an episode of severe hypoglycemia ensues.

About Diabetic Hypoglycemia

Published by ESP Bioscience (Crowthorne, UK), *Diabetic Hypoglycemia* is an influential online diabetes journal led by Editor-in-Chief Professor Brian Frier (Edinburgh, UK), with Associate Editors: Professor Simon Heller (Sheffield, UK), Professor Christopher Ryan (Pittsburgh, USA), Dr Rory McCrimmon (Dundee, UK), and Professor Anthony L. McCall (Virginia, USA). Published three times annually,

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