Person—severe hypoglycaemia history, status code N

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# Person—severe hypoglycaemia history, status code N

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element |
| Short name: | Hypoglycaemia - severe |
| Synonymous names: | Hypoglycaemia - severe |
| METEOR identifier: | 270367 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 21/09/2005 |

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| Data element concept attributes | |
| Identifying and definitional attributes | |
| Data element concept: | [Person—severe hypoglycaemia history](https://meteor.aihw.gov.au/content/269797) |
| METEOR identifier: | 269797 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 21/09/2005 |
| Definition: | Whether the individual has had  [**severe hypoglycaemia**](https://meteor.aihw.gov.au/content/327322). |
| Context: | Public health, health care and clinical settings |
| Object class: | [Person](https://meteor.aihw.gov.au/content/268955) |
| Property: | [Severe hypoglycaemia history](https://meteor.aihw.gov.au/content/269303) |
| Source and reference attributes | |
| Submitting organisation: | National diabetes data working group |
| Reference documents: | Definition corresponds with the Diabetes Control and Complications Trial (DCCT): DCCT New England Journal of Medicine, 329(14), September 30, 1993. Report of the Health Care Committee Expert Panel on Diabetes; Commonwealth of Australia 1991; ISBN 0644143207. |

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| Value domain attributes | |
| Identifying and definitional attributes | |
| Value domain: | [Severe hypoglycaemia history status code N](https://meteor.aihw.gov.au/content/270872) |
| METEOR identifier: | 270872 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 01/03/2005 |
| Definition: | A code set representing whether a person has had severe hypoglycaemia. |

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| Representational attributes | | |
| Representation class: | Code | |
| Data type: | Number | |
| Format: | N | |
| Maximum character length: | 1 | |
|  | **Value** | **Meaning** |
| Permissible values: | 1 | Yes - has had severe hypoglycaemia requiring assistance from another party |
|  | 2 | No - has not had severe hypoglycaemia requiring assistance from another party |
| Supplementary values: | 9 | Not stated/inadequately described |

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| Collection and usage attributes | |
| Guide for use: | Record whether or not the person has a history of severe hypoglycaemia requiring assistance.  When reporting :   * Record whether the individual has had severe hypoglycaemia requiring assistance from another party in the last 12 months. |
| Collection methods: | Ask the individual if he/she has had a severe hypoglycaemia requiring assistance. Alternatively obtain the relevant information from appropriate documentation. |



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| Data element attributes | |
| Source and reference attributes | |
| Submitting organisation: | National diabetes data working group |
| Origin: | National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary. |
| Relational attributes | |
| Related metadata references: | Has been superseded by [Person—severe hypoglycaemia indicator, code N](https://meteor.aihw.gov.au/content/302825)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 21/09/2005  Is re-engineered from  [Hypoglycaemia - severe, version 1, DE, NHDD, NHIMG, Superseded 01/03/2005.pdf](https://meteor.aihw.gov.au/content/273867)  (17.8 KB)  *No registration status* |
| Implementation in Data Set Specifications: | [Diabetes (clinical) DSS](https://meteor.aihw.gov.au/content/273054)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 21/09/2005  ***DSS specific information:***  Most hypoglycaemic reactions, however, do not cause long term problems, but the risks of permanent injury to the brain are greater in children under the age of 5 years, the elderly with associated cerebrovascular disease and patients with other medical conditions such as cirrhosis and coeliac disease. The serious consequences of hypoglycaemia relate to its effects on the brain. Rarely hypoglycaemia may cause death.  It is important to know how to recognise and react when someone is unconscious from hypoglycaemia. These people should be placed on their side and the airway checked so that breathing is unhampered and nothing should be given by mouth as food may enter the breathing passages. Treatment needs to be given by injection - either glucagon (a hormone which raises the blood glucose by mobilising liver stores) or glucose itself. Glucagon should be given by injection (usually intramuscular) at a dose of 0.5 units (or mg) in children under the age of 5 years and 1.0 units (mg) for all older age groups.  All diabetic patients at risk of developing hypoglycaemia should have glucagon at home. Their families need to be shown how to administer it in times of severe hypoglycaemia. |