Hypoglycaemia - severe

Identifying and Definitional Attributes

Data Dictionary: NHDD

Knowledgebase ID: 000827   Version number: 1

Metadata type: DATA ELEMENT

Registration Authority: NHIMG   Admin status: SUPERSEDED

Effective date: 01-MAR-05

Definition: Whether the individual has had severe hypoglycaemia, which is defined as hypoglycaemia requiring assistance from another party.

Context: Public health, health care and clinical settings:
Hypoglycaemia is defined as an abnormally low level of glucose in the blood, which occurs when the blood glucose level falls to values low enough to cause symptoms and signs.

Relational and Representational Attributes

Datatype: Numeric

Representational form: CODE

Representation layout: N

Minimum Size: 1

Maximum Size: 1

Data Domain:
1	Yes-has had severe hypoglycaemia requiring assistance from another party
2	No-has not had severe hypoglycaemia requiring assistance from another party
9	Not stated/ inadequately described

Guide For Use: Record whether or not the person has a history of severe hypoglycaemia requiring assistance.

Collection Methods: Ask the individual if he/she has had a severe hypoglycaemia requiring assistance. Alternatively obtain the relevant information from appropriate documentation.

Related metadata: relates to the data element Glycosylated Haemoglobin (HbA1c) - measured version 1
relates to the data element Glycosylated Haemoglobin (HbA1c) -

upper limit of normal range version 1

Administrative Attributes

Source Document: National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary.

Source Organisation: National Diabetes Data Working Group (NDDWG).

Comments: When reporting :
-Record whether the individual has had severe hypoglycaemia requiring assistance from another party in the last 12 months.

The medications used in the treatment of diabetes may cause the blood glucose value to fall below the normal range and this is called hypoglycaemia.
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.

Reference:
Definition corresponds with the Diabetes Control and Complications Trial: 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.

Data Element Links

Information Model Entities linked to this Data Element

NHIM   Physical wellbeing

Data Agreements which include this Data Element

DSS - Diabetes (clinical)   From 01-Jan-03 to