

Do you know how to look after pupils with diabetes?

Diabetes can affect even very young children and is becoming more common

Type 1 diabetes predominates in children and requires insulin injections via a special device called an insulin pen, (see pictures) for life. Type 2 rarely occurs in children but is on the increase and may be treated with a reduced fat/sugar diet and/or tablets.

Good diabetes control involves keeping the blood sugar level within a defined range and this involves checking the level by a simple finger prick test.

Too low blood sugars ('hypos') can adversely affect the child causing variable symptoms such as poor concentration, dizziness, shaking, and is initially easily treated with sugar containing drinks or food.

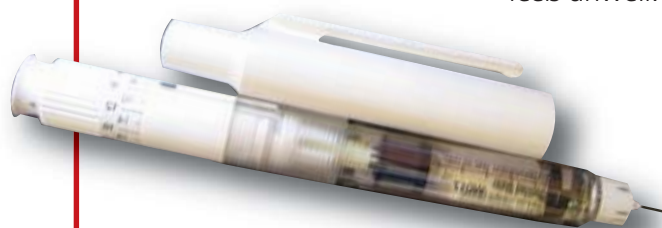
Too high blood sugars can cause the child to be irritable, thirsty and have difficulty concentrating but only needs action (ring parent or carer) if the child feels unwell.



Changes in availability of insulins and evidence supporting possible better long-term outcomes mean that many children will now need to have insulin at school.

Depending on individual children's needs some will need a suitable area to give their own insulin, others will need some supervision, and a few will need an appropriately trained adult to give the injection.

We can offer awareness raising sessions and training on specific points and examples of practical ways in which schools can help. There is more detailed written information held by the head teacher should you wish to know more about this. If there are any questions relating to how we look after diabetes, please contact your School Nurse who will liaise with the Diabetes Specialist Nurse.



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