

Protecting your baby from low blood sugar

Perinatal Services - Maternity

Introduction

You have been given this leaflet because your baby has or may be at risk of having low blood sugar (also called low blood glucose or hypoglycaemia).

What is low blood sugar?

It is especially important to keep baby warm and feed as often as possible to maintain normal blood sugar levels.

Your baby is at risk of low blood sugar in the first few hours and days after birth if they are:

- Born with low birth weight
- Born early
- Poorly at birth.

Or you have:

- Diabetes
- Taken certain medications (such as beta-blockers) in pregnancy.

If your baby is in any of these risk groups, we will check their blood sugar level by giving them regular blood tests.

Very low blood sugar, if not treated, can cause brain injury and developmental problems. However, if we find low blood sugar early we can treat it to avoid harm to the baby.

How is blood sugar tested?

Your baby's blood sugar is tested by a heel prick test while you are still in hospital.

A tiny drop of blood is needed and is often taken while you are holding your baby in skin to skin contact. You will know the result of the blood test straight away.

The first test should be done before baby's second feed (2 - 4 hours of age) and again until their blood sugar levels are okay.



- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.



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How can my baby avoid low blood sugar?

Skin-to-skin contact

Hold baby skin to skin on your chest to keep them calm, warm and get breastfeeding off to a good start. Lie with your head and shoulders supported, so you are not completely flat. Make sure you can see your baby's face clearly to check that they are well.

Keep your baby warm

During skin-to-skin contact your baby should wear a hat and be kept warm with a blanket or towel. At home your baby will not need to wear a hat indoors. If your baby is in a cot, keep them warm with blankets.

Feed as soon as possible after birth

Staff will help you with feeding and make sure you know the signs to look out for that baby is feeding well. Ask if you are not sure breastfeeding is going well or how much formula to give your baby.

Feed as often as your baby wants, but do not leave more than 3 hours between feeds.

A baby can tell you they are hungry by showing feeding cues:

- Moving their eyes quickly (can be while shut)
- Mouth and tongue movements
- Wriggling around
- Sucking hands.

Feed your baby when you notice these cues, do not wait for them to cry as this can be a late sign of

Let your baby feed for as long as they want and offer both breasts if you are breastfeeding.

If your baby is not showing any feeding cues yet, hold baby in skin-to-skin and offer a feed.

To reduce the risk of low blood sugar you should feed your baby no longer than three hours from the beginning of the last feed. Your midwife will talk to you about when you can move on to responsive feeding.

Express your milk (colostrum) while pregnant

If you are reading this leaflet while you are pregnant, you might want to try to hand express some colostrum before your baby is born.

Talk to your midwife if this is something you would like to do and read the leaflet 'What you need to know about expressing breastmilk before your baby is born'.



Give your baby some expressed breast milk

If your baby is struggling to breastfeed, give expressed breast milk. Staff can show you how to hand express or you scan the QR code below.

If you have expressed colostrum before your baby was born use it now.

You midwife will support you with expressing, giving and storing milk.



What happens if my baby's blood sugar is low?

If the blood sugar test result is low your baby should feed as soon as possible and provide skin-toskin contact.

If the blood sugar level is very low or baby is too sleepy or unwell to feed the neonatal doctors might want to move your baby straight away to the neonatal unit to be treated quickly.

Another blood sugar test will be done before baby's next feed or within 2 - 4 hours.

- If your baby does not start breastfeeding straight away, a member of staff will check them to
 work out why. If they are happy that your baby is well, they will help you to hand express your
 milk and give it by oral syringe / finger / cup / spoon
- If your baby has not breastfed and you have been unable to express any milk, you will be advised to give formula milk until your milk supply increases
- You should continue to offer breastfeeds and try to express milk as often as possible to ensure your milk supply increases
- To bring your baby's sugar level up, the team might prescribe a dose of dextrose (sugar) gel

Staff will explain any treatment that might be needed. In most cases, low blood sugar quickly improves within 24 - 48 hours and your baby will have no further problems.

What if I am worried that my baby is unwell?

Tell staff straight away if you are worried about your baby. If your baby seems unwell, they may have low blood sugar.

As well as doing blood tests, staff will check your baby to make sure they are well. It is important that you also watch your baby closely as you are with them all the time and know baby best. Parents' instincts are often right.

What are the signs that my baby may be unwell?

Your baby is not feeding well

In the first few days your baby should feed at least every 3 hours until their blood sugar is stable. It is okay to ask a member of staff to check if your baby is attached and feeding well at the breast, or how much formula your baby needs.

If your baby becomes less interested in feeding than before, this may be a sign they are unwell, and you should talk to a member of staff straight away.

Your baby feels too warm or too cold

Your baby should feel slightly warm to touch, although hands and feet can sometimes feel a little cooler. If you use a thermometer the temperature should be between 36.50 C and 37.50 C. If your baby is cold this can lead to low blood sugar.

If they are too hot this can be a sign of infection which can also lead to low blood sugar.

Your baby does not seem alert or isn't responding to you

When your baby is awake, they will look at you and pay attention to your voice and gestures. If you try to wake your baby, they should respond to you in some way.

Your baby is completely floppy or very jerky

A sleeping baby is very relaxed but should still have some muscle tone in their body, arms, and legs and should respond to your touch. It can be normal to make brief, light, jerky movements.

Ask a member of the team if you are not sure about your baby's movements. If your baby feels completely floppy, with no muscle tone when you lift their arms or legs, or if your baby is making lots of strong jerky movements, this is a sign they may be very poorly.

The colour inside your baby's mouth is not pink

Look at the colour inside your baby's lips and tongue – they should be pink.

Your baby is finding breathing hard work

Babies' breathing can sometimes be very fast for a few seconds or pause for a few seconds.

Call 999 if you notice your baby is:

- Breathing very fast for longer
- Finding breathing hard with very deep chest movements and nostrils flaring
- Making noises with each breath out.

Who do I call if I am worried?

In hospital - inform any member of the clinical staff

At home - call the Maternity Triage Unit 01902 695037 or NHS 111

Or if you are really worried

Take your baby to your nearest Paediatric A&E or dial 999.

How do I monitor my baby at home?

It is recommended that your baby stays in hospital for 24 hours after birth. After that, if your baby's blood sugar stable and your baby is feeding well, you will be able to go home.

Before you go home

Make sure you know how to tell if your baby is getting enough milk. A member of staff will explain the normal pattern of wet and dirty nappies and changes in the colour of dirty nappies.

For further information, see the useful website at the end of this leaflet or look at the feeding assessment in your baby's red book.

At home

It is important to make sure that your baby feeds well: at least 8 times every 24 hours. Most breastfed babies feed more often than this.

Unless you have been told to do so, there is no need to carry on waking your baby to feed every 2 – 3 hours as long as they have had at least 8 feeds over 24 hours.

You can now start to feed your baby responsively which is when they show feeding cues or when you feel you want to feed them for your comfort. Your midwife will talk to you more about this.

If you are bottle feeding, make sure you are not overfeeding your baby. Offer the bottle when baby shows feeding cues and look for signs that baby wants a break. Your baby will not always finish a bottle – let them take as much milk as they want.

Carry on looking for signs that your baby is well and talk to a healthcare professional if you are worried about anything.

Useful contact telephone numbers

Infant Feeding Team - 01902 695578

Open office hours - leave a message and the team will get back to you.

National Breastfeeding Helpline - 0300 100 0212

Breastfeeding information and support available 24 hours a day, every day of the year.

Useful websites for more information



First Steps Nutrition Trust

For information about formula feeding, formula milk and breastfeeding: <u>First Steps</u> Nutrition Trust



Unicef UK – The Baby Friendly Initiative

Breastfeeding assessment tool: 'How you and your midwife can recognise that your baby is feeding well': <u>Breastfeeding Assessment Tools - Baby Friendly Initiative (unicef.org.uk)</u>



British Association of Perinatal Medicine BAPM Framework for Practice (2024)

Identification and Management of Neonatal Hypoglycaemia in the Full-Term Infant (Birth to 72 hours): <u>Identification and Management of Neonatal Hypoglycaemia in the Full Term Infant (Birth – 72 hours)</u> | <u>British Association of Perinatal Medicine (bapm.org)</u>

Blood sugar 2.0 mmol or more 2 blood sugars in a row	Blood sugar 2.6 mmol or more 4 blood sugars in a row
Next blood glucose is due by:	
Next feed is due before: hrs	
Time: Blood glucose:	
Was the blood glucose okay?	
Next blood glucose is due by:	
Next feed is due before: hrs	
Time: Blood glucose:	
Was the blood glucose okay?	
Next blood glucose is due by:	
Next feed is due before: hrs	
Time: Blood glucose:	
Was the blood glucose okay?	
Nava bland di sassita i di	
Next blood glucose is due by:	
Next feed is due before: hrs	
Time: Blood glucose:	
Was the blood glucose okay?	

Below 37 weeks gestation

37 weeks or more

Next blood glucose is due by:
Next blood glucose is due by:
Next blood glucose is due by:hrs Next feed is due before:hrs Time:Blood glucose:
Next blood glucose is due by:

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息,如易读或其他语种,请告诉我们。 如果您需要口译人员或帮助,请告诉我们。