

Parent Information Leaflet for babies at risk of low blood glucose.

What is low blood glucose?

Babies who are small, premature, unwell at birth, or whose mothers are diabetic or have taken certain medication (beta-blockers), may have low blood glucose in the first few hours and days after birth. It is important for these babies to be kept warm and feed as often as possible in order to maintain normal blood glucose levels. A small amount of blood from a Heel prick is needed to check the blood glucose level, and it can be done while you are holding your baby in skin-to-skin contact. Extremely low blood glucose, if not treated, can cause brain injury resulting in developmental problems. If low blood glucose is identified quickly, it can be treated to avoid harm to your baby. The first blood test should be done before the second feed (2-4 hours after birth), and repeated until the blood glucose levels are stable.

How to avoid low blood glucose

- **Keep your baby warm.** Skin-to-skin contact with your baby helps keep your baby calm, and warm and helps establish breastfeeding. Keep a hat on your baby for the first few days while he / she is in hospital. Keep your baby in skin contact on your chest covered with a blanket and look into your baby's eyes to check his / her well-being in this position, or keep warm with blankets if left in a cot.
- **Feed as soon as possible after birth.** Ask a member of staff to support you with feeding until you are confident, and make sure you know how to tell if breastfeeding is going well, or how much formula to give your baby.
- **Feed as often as possible in the first few days.** Whenever you notice "feeding cues" which include rapid eye movements under the eyelids, mouth and tongue movements, body movements and sounds, sucking on a fist, offer your baby a feed. Don't wait for your baby to cry – this can be a late sign of hunger.
- **Feed as often as baby wants, but do not leave your baby more than 3 hours between feeds.** If your baby is not showing any feeding cues yet, hold him/her skin-to-skin and start to offer a feed about 3 hours after the start of the previous feed.
- **Express your milk (colostrum).** If you are breastfeeding and your baby struggles to feed, try to give some expressed breast milk. A member of staff will show you how to hand express your milk, or watch the UNICEF hand expression video (search "UNICEF hand expression"). If possible, it is good to have a small amount of expressed milk saved in case you need it later. So try to express a little extra breast milk in between feeds. Ask your midwife how to store your expressed milk.

Tell staff if you are worried about your baby

If your baby appears to be unwell, this could be a sign that they have low blood glucose. As well as doing blood tests, staff will observe your baby to check he / she is well. Your observations are also important, as you are with your baby all the time. Parents' instincts are usually correct.

The following are signs that your baby is well:

- **Is your baby feeding well?** Your baby should feed effectively at least every 3 hours, until blood glucose is stable, and then at least 8 times in 24 hours.

Ask a member of staff how to tell if your baby is attached and feeding effectively at the breast, or how much formula he / she needs. If your baby becomes less interested in feeding than before, you should raise this with a member of staff.

- **Is your baby warm enough?** 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 36.5°C and 37.5°C inclusive.
- **Is your baby alert and responding to you?** When your baby is awake, he/she 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.
- **Is your baby's muscle tone normal?** 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. If your baby feels completely floppy, with no muscle tone when you lift their arms or legs, or if your baby is making strong repeated jerky movements, this is a sign they may be unwell. 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.
- **Is your baby's colour normal?** Look at the colour of the lips and tongue – they should be pink.
- **Is your baby breathing easily?** Babies' breathing can be quite irregular, sometimes pausing for a few seconds and then breathing very fast for a few seconds. If you notice your baby is breathing very fast for a continuous period (more than 60 breaths per minute), or seems to be struggling to breathe with very deep chest movements, nostrils flaring or making noises with each breath out – this is not normal.

Who to call if you are worried

- In hospital, inform any member of the clinical staff.
- At home, call your community midwife and ask for an urgent visitor advice.
- Out of hours, call NHS 111

If you are really worried, take your baby to your nearest Paediatric A&E or dial999.

Going home with your baby

It is recommended that your baby stays in hospital for at least 24 hours after birth and until your baby's blood glucose is stable and he/she is feeding well. Before you go home, make sure that you know how to tell if your baby is getting enough milk. A member of staff will explain the normal pattern of changes in the colour and number of wet and dirty nappies. For further information, if you are breast feeding see 'How you and your midwife can recognise that your baby is feeding well (search 'UNICEF Baby Friendly assessment tool')'.

It is important to ensure that your baby feeds **at least 8 times every 24 hours** and most babies feed more often than this.

If you are bottle-feeding make sure that you do not over feed your baby. Offer the bottle when he/she is showing feeding cues and observe for signs that he/she wants a break. Don't necessarily expect your baby to finish a bottle – let him or her take as much milk as he / she wants.

Once you are home, no special care is needed. As with all newborn babies, you should continue to look for signs that your baby is well, and seek medical advice if you are worried at all about your baby.

Further feeding information is found in your booklet 'Bump, Baby and Beyond' page 110 onwards