
Diabetes in the Child Care Setting

Diabetes is a chronic condition in which the pancreas does not produce enough insulin or there is underuse of insulin. Insulin is needed for the body to store and use sugar (glucose). When insulin is not produced or used in the proper amount, diabetes occurs. Most children have Type I (also called juvenile or insulin dependent diabetes); most adults have Type II (also called adult-onset or non insulin dependent diabetes).

The exact cause of diabetes is unknown. Some signs and symptoms of Type I diabetes are: increased urination, hunger and thirst; sudden weight loss; irritability; feeling tired; and elevated blood sugar. The major goal in the treatment of diabetes is good control of the child's blood sugar and prevention of long-term complications. Control of the blood sugar is achieved by the child receiving insulin (via injections, insulin pump or pen) daily following a special diet, exercise and monitoring blood sugar.

Insulin and exercise lower blood sugar. Food raises blood sugar. An insulin reaction occurs when blood sugar is too low, either due to too much exercise or too little food. Insulin reaction occurs suddenly.

Warning signs and symptoms of a child having an insulin reaction are:

- Excessive Perspiration, Inattentiveness, Nausea
- Headache, Confusion, Drowsiness
- Irritability or Crying, Inability to Concentrate, Trembling
- Blurring of Vision, Abdominal Pain, Lack of Coordination

If the reaction is not treated, a child could become unconscious or have a seizure.

It is important to have an approved plan by the child's parent and health care provider on how the insulin reaction should be handled. Usually the child is given some form of sugar (this will rapidly increase the amount in the blood). Sugar can be provided by giving the child two spoonfuls of sugar, fruit juice or regular pop. The child should improve within 10 minutes. Provide the child with additional food and have him resume activities. (The specific actions for an insulin reaction should be spelled out in the child's Medical/Physical Care Plan.) If he does not improve, call the parents and health care professional. Call 911 if the child becomes unresponsive.

Additional tips in caring for the diabetic child:

- Staff should know the signs of an insulin reaction and how to handle an emergency the child may have.
- Prepare meals according to the child's special needs.
- Give meals and snacks on time.
- Ask parent or health care provider about giving extra food prior to strenuous exercise activity.
- Assist in the monitoring the child's blood-sugar level if requested.

Remember, children with diabetes are normal children, they do not want to be singled out as "different." With few exceptions and some precautions taken to avoid insulin reactions, they can and should participate in all class activities. For more information, contact the American Diabetes Association Information Service Center, 1-800-ADA-DISC, Ohio Diabetes Prevention and Control Program, 614-466-2144 or the Ohio Affiliate of the American Diabetes Association, 1-800-DIABETES (1-800-342-2383).