



National Women and Infants' Health
Programme
Acute Hospital Division
Dargan Building, Unit 7A
Heuston South Quarter
Tel. +353 (76) 695 9984

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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Dear colleagues

The National Women and Infants' Health Programme has recently been informed about a serious concern consequent to an on-going review of a baby with encephalopathy secondary to hypoglycaemia. The mother had insulin dependent diabetes.

The reviewer advised that the HSE guidelines '*management of Pre-Gestational Diabetes Mellitus from Pre-conception to the Postnatal Period, July 2010*'.

"Provides insufficient guidance on screening for hypoglycaemia in new-born infants. Sections 3.3.3, 4.3.4 and 5.5.3 from these guidelines should be removed from practice immediately".

The review states that "This recommendation is based on a review of best practice including the guidelines in the following from North America and the United Kingdom;

- 1) Canadian Paediatric Society. Screening guidelines for newborns at risk for low blood glucose – position statement. *Paediatr. Child Health*. 2004;9: 723-729.
- 2) NICE Guidance, Department of Health United Kingdom. Diabetes in Pregnancy: management from pre-conception to the postnatal period. Last updated August 2015
- 3) Committee on Fetus and Newborn, American Academy of Pediatrics. Adamkin, D.H. Clinical report-postnatal glucose homeostasis in late-preterm and term infants. *Paediatrics*. 2011; 127: 575-57".

The purpose of this letter is therefore to endorse that the recommended HSE guidelines (as refers to neonates) are removed from practice.

I understand that in addition to the above three guidelines the British Association of Perinatal Medicine "*Identification and Management of Neonatal Hypoglycaemia in the Full Term Infant*" Framework for Practice April 2017, should be considered also as relevant.

Kind regards,



Dr Peter McKenna
National Clinical Director
National Women and Infants' Health Programme