

Free e-learning resource

Hypoglycaemia and type 2 diabetes

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Active, 76-year-old Jean, who has type 2 diabetes, has experienced dizziness, confusion and speech slurring after gardening for several hours. A capillary blood glucose reading of 2.3 mmol/L was found.

How would you respond to her episode?

John, a 49-year-old HGV driver, uses metformin, gliclazide and alogliptin for his type 2 diabetes. Occasionally, he experiences mild symptoms of hypoglycaemia.

Would you make any changes to his medication?

Chinua has had type 2 diabetes for 13 years. He has recently switched from a basal insulin to a twice-daily premixed insulin. He has heard that his risk of experiencing hypoglycaemia may be higher.

What symptoms should Chinua be looking out for?

65-year-old Candice has collapsed at her type 2 diabetes review. Her capillary glucose reading is 1.7 mmol/L.

How can you manage this episode of severe hypoglycaemia?

By working through these interactive cases, you will consider the following issues and more:

- What constitutes hypoglycaemia.
- Its causes and risk factors in type 2 diabetes.
- Practical advice on its detection and management.
- Strategies for minimising the risk.

D *Diabetes & Primary Care's* series of interactive case studies is aimed at GPs, practice nurses and other professionals in primary and community care who would like to broaden their understanding of type 2 diabetes.

The four mini-case studies created for this issue of the journal cover various aspects relating to hypoglycaemia and type 2 diabetes.

The format uses typical clinical scenarios as tools for learning. Information is provided in short sections, with most ending in a question to answer before moving on to the next section.

Working through the case studies will improve your knowledge and problem-solving skills in type 2 diabetes by encouraging you to make evidence-based decisions in the context of individual cases.

You are invited to respond to the questions by typing in your answers. In this way, you are actively involved in the learning process, which is hopefully a much more effective way to learn.

By actively engaging with these case histories, I hope you will feel more confident and empowered to manage such presentations effectively in the future.

David Morris, Specialist Doctor in Diabetes, Royal Shrewsbury Hospital; Undergraduate Clinical Tutor, Keele University; and retired GP

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<https://live.diabetesonthenet.com/case-studies>