Management of Medical Emergencies in Dental Practice
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Diabetes Mellitus - Clinical Scenario

In this video, we are going to see how to manage hypoglycemic syncope.

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Diabetes is the most common endocrine disorder. It is a group of diseases marked by high levels of blood glucose, resulting from defects in insulin production, insulin action, or both.

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Acute complications of diabetes mellitus include hypoglycemia, diabetic ketoacidosis and hyperglycaemic, hyperosmolar, non-ketotic, coma.

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A proper history about the disease and the drugs should be well inquired. Recent blood glucose values must be referred before starting the treatment.

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Individual's having a fasting blood glucose level of less than 140 mg per DL and random blood glucose levels less than 200 ml per DL can be taken for the procedure.

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The more acutely life threatening complication of Diabetes Mellitus is Hypoglycemia, or low level of blood sugar. Hypoglycemic Syncope may arise when the patient has taken either a high dose of drug and food.

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Or normal dose of drug and food followed, by a long gap or normal dose of drug with no food. The management of Hypoglycemic Syncope in a well awake individual includes the administration of around 15 grams of oral carbohydrate, with constant monitoring of the blood glucose levels.

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In, Unconscious Individuals, 1 gram of glucagon should be administered intramuscularly or subcutaneously along with around 20 to 50 ml of 50 percent dextrose solution intravenously.