



Treatment and Symptoms of Hypoglycemia in Low Blood Sugar

Jane Thomas*

Department of Science, University of Kashmir, Srinagar, Jammu and Kashmir

DESCRIPTION

The fear of hypoglycemia and the emergence of syndromes like impaired awareness and counter-regulatory deficiency present additional risks for treatment intensification. Because of the negative cardiovascular effects brought on by hypoglycemia, rapid lowering of HbA1c in type 2 diabetics may be potentially dangerous. Numerous daily activities, including driving, performing well at work, and enjoying leisure activities, can be affected by hypoglycemia. It takes a lot of time and money to take steps to lower the risk of hypoglycemia. The main counter-regulatory hormones, glucagon and epinephrine (adrenaline), are released when blood glucose levels fall in a non-diabetic human. Endogenous insulin secretion is suppressed during this time.

If blood sugar levels drop too low, hypoglycemia symptoms and indications may manifest, and these include:

- Feeling drained or exhausted
- Shaking
- Sweating
- Headache
- Hunger or Nausea
- Irritability or Anxiety
- Difficulty Concentrating
- Dizziness or Light-headedness
- Lips, tongue, or cheek tingling or numbness.

Signs and symptoms of hypoglycaemia that develop over time include:

- Confusion, strange behaviour, or both, such as the inability to do daily duties
- Loss of coordination
- Slurred speech
- Blurry or tunnel vision
- Nightmares, if asleep

The following symptoms of severe hypoglycaemia:

- Unresponsiveness (loss of consciousness)

- Seizures
- Light-headedness or dizziness
- Lip, tongue, or cheek tingling or numbness

This could happen for a number of reasons. A side effect of diabetes medications is the most frequent cause of low blood sugar. Insulin, a hormone created by their pancreas, assists glucose, the body's primary energy source, in getting into the cells. Glucose can enter the cells thanks to insulin, giving them the energy they require. Their muscles and liver both have glycogen stores for extra glucose. The pancreatic hormone glucagon tells the liver to release glucose into their bloodstream by releasing stored glycogen. Until they eat again, this keeps their blood sugar levels within a normal range. Their kidneys and liver both play a major role in this process. The body can break down fat reserves and utilize the byproducts of fat breakdown as an alternate fuel during extended fasting. As a result, blood glucose levels increase and occasionally rises to dangerously high levels. They might use insulin or other blood sugar-lowering drugs to solve this issue. In addition, hypoglycemia might happen if they exercise more than normal or if they eat less than usual after taking their daily dose of diabetic medication.

People without diabetes are substantially less likely to experience hypoglycemia. Some causes include:

Medications: Hypoglycemia can happen if they accidentally consume someone else's oral diabetic medication. Other drugs have the potential to result in hypoglycemia, particularly in individuals who are young or have kidney issues. Quinine, a drug used to treat malaria, is one example.

Excessive alcohol consumption: Drinking excessive amounts of liquids without eating can hinder the liver from releasing glucose from its glycogen reserves into the bloodstream. Hypoglycemia might be the outcome.

Critical illnesses include: Severe infections, kidney disease, advanced heart disease, and liver conditions such severe cirrhosis or hepatitis can all cause hypoglycemia. It may be challenging for their body to effectively eliminate medications if they have

Correspondence to: Jane Thomas, Department of Science, University of Kashmir, Srinagar, Jammu and Kashmir, e-mail: janethomas@gmail.com

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kidney problems. This may affect glucose levels because of an accumulation of medications that lower blood sugar.

Long-term starvation: When they don't eat enough, their body uses up the glycogen stores it needs to produce glucose, which can lead to hypoglycemia. Anorexia nervosa, an eating disorder, is one condition that can cause hypoglycemia and long-term malnutrition.

Insulin overproduction: An uncommon pancreatic tumor called an insulinoma might cause them to produce excessive amounts of insulin, which can lead to hypoglycemia. A surplus of insulin-like molecules can also be produced as a result of other cancers. The unusual cells in the pancreas can release too much insulin, which results in hypoglycemia.

Hormone deficiencies: Deficits in some hormones that control glucose synthesis or metabolism can be caused by specific illnesses of the pituitary and adrenal glands. A child who lacks enough growth hormone may experience hypoglycemia.

After particular meals, hypoglycemic symptoms can appear, but it is unclear why. Although stomach bypass surgery is the procedure most frequently linked to this, it can also happen to patients who have had other surgeries. Low blood sugar warning signs and symptoms like trembling or irregular heartbeats are no longer produced by the body or brain (palpitations). The possibility of severe, potentially fatal hypoglycemia rises when this occurs.