

COVID-19

The Australian Chief Medical Officer (Brendan Murphy) has stated “We know that very, very few children contract COVID-19. All of the international data shows that it's very, very uncommon for children to get symptomatic disease.”

This opinion has been confirmed by the International Society for Pediatric and Adolescent Diabetes who have published the position statement “children with diabetes have not shown a different disease pattern compared to their peers.”

It is important that you continue to manage you diabetes as well as you possibly can and contact your diabetes team if you have any concerns. If your child becomes unwell, then follow your usual sick day management plan. If you are still concerned then contact your local doctor or attend the emergency department.

Sick Day Management Plan

If you have an Apple device/ phone download the DISIDA sick day app from the Apple store. It will guide you on what to do if your child or teenager becomes ill.

Call the hospital for advice/ or go to hospital emergency when:

Child/adolescent is drowsy or lethargic

Child/adolescent has 3 vomits, 3 diarrhoeas or abdominal pain

Deep or rapid breathing

Sever chest pain, stomach pain or severe headache

Blood ketones at 1.0 mmol/L or more

Children with well controlled diabetes have no greater risk of contracting infections than anybody else. Having diabetes introduces the need for closer monitoring during sick days. Good management during illness can prevent diabetic ketoacidosis and hospital admissions.

For illness causing high BGL's:

- Change your pump cartridge/needle or if on injections change your insulin vial in pen
- **NEVER** stop insulin even if you are unable to eat.
- If you don't think your child will eat, Use your EZYBICC card 'o' column OR if on pump enter BGL- do this every 2 hours until they are able to take food.
- Check BGL's every 2 hours or wear CGM
- Check blood ketones every 4 hours.
- Visit GP to treat underlying illness and or infection
- Drink sugar free fluids to maintain hydration.

For illness causing low BGL's:

- **NEVER** stop insulin even if you are unable to eat.
- If you don't think your child will eat, Use your EZYBICC card 'o' column OR if on pump enter BGL- do this every 2 hours until they are able to take food.
- Check BGL's every hour or wear CGM
- Check blood ketones every 4 hours. **Ketones can be produced during illness even with normal or low BGL's**
- Sip on sugar containing fluids - Aim for ½ cup per hour of lemonade or juice
- Mini doses of glucagon may be used to treat hypoglycaemia when unable to tolerate food or fluids

Minidose Glucagon Guideline

- Children/adolescents who are hypoglycaemic (BGL < 4.0 mmol/LO) with inter current illness (vomiting) and cannot tolerate food or fluids (food refusal or feeling sick)

How to use:

- Inject all the water into the glucagon vial and remove the needle.
- Discard needle into the sharps container
- Use an insulin syringe to draw up and administer the glucagon solution
- Use the following table for a dose

Age (years)	units on an insulin syringe
< 2	2
2-15	1 per year of age
>15	15

- When drawing up the Glucagon, remove all the air bubbles from the syringe and administer as you would an insulin injection
- BGL rechecked in 30 min. If BGL < 5.5 mmol/L but unable to drink fluids, give double the dose of glucagon previously given, e.g. if 2 units given then give 4 units.
- Re check the BGL in another 30 min.
- Glucagon rescue can be given a 3rd time if the BGL remains below 5.5mmol/L. 3rd dose is the same amount as the 2nd dose.
- Continue to offer child small amounts of fluid and food
- BGL hourly if maintained BGL > 5.5mmol/L

- After glucagon has been reconstituted keep in refrigerator for 24 hours then discard (replace supply immediately with script from your GP)
- Go to hospital if your child's BGL is $<5.5\text{mmol/mol}$ after 3 doses of glucagon

Treat symptoms to make the child adolescent comfortable

Make sure they drink a reasonable amount of fluids and rest.

Sore nose/dry lips – Try lip balm or skin moisturiser.

Sore throat – Try warm salt water gargles or sipping warm peppermint or chamomile tea.

Fever – If the temperature is mild (37.5C or less) then make them comfortable and give cool drinks.

If they have a temperature over 37.5C then

- If they are on CGMS – give Ibuprofen (at the dose stated on the container)
- If not on CGMS then give paracetamol (at the dose stated on the container)
- Contact your GP

If they have a headache

- Make sure they drink enough fluids and rest
- If they are on CGMS – give Ibuprofen (at the dose stated on the container)
- If not on CGMS then give paracetamol (at the dose stated on the container)
- If concerned then contact your GP