

- Diabetes

NEED-TO-KNOW
FACTS ABOUT...

6 dead in bed syndrome

Dead in Bed Syndrome (DIBS) refers to the sudden, unexplained death of a young person with type 1 diabetes, who goes to bed seemingly fine, and is found dead in an undisturbed bed.

1 Young and type 1

Dead in Bed Syndrome almost always impacts young people living with type 1 diabetes – children, adolescents and young adults. The data available on the syndrome suggests that DIBS is responsible for 6% of all deaths in people with diabetes below 40 years of age. There have not been any significant reports of DIBS affecting people with type 2 diabetes.

2 Unknown cause

Dead in Bed Syndrome is poorly understood, and a cause has not been definitively established. However, evidence suggests that it is most likely caused by nocturnal hypoglycaemia, or a severe 'low' at night during sleep, which in turn triggers a fatal cardiac arrhythmia (irregular heartbeat). But because it is difficult to diagnose hypoglycaemia after death, autopsy results are often negative.

3 Hypo anxiety

Experiencing a 'hypo' (when the blood glucose level drops below 4.0mmol/L) is common for people with type 1. Almost 50 per cent of hypoglycaemic events occur at night, during sleep. For many people with type 1 (or their carers), the only sure way of

need to know

avoiding a hypo overnight is to wake every few hours and test BGLs.

4 Life-saving tech

Thankfully, Dead in Bed Syndrome is relatively rare, and the introduction of certain technologies means it's now even less common. The use of a Continuous Glucose Monitor (CGM), especially one that works in conjunction with an insulin pump, means that people with type 1 can go to bed at night feeling a bit more secure, as their CGM will alert them, or their carers, if their BGLs start dropping rapidly, or below a certain level.

5 CGM funding

Thanks to the DANII Foundation (see p120), all Australians living with type 1 are eligible to apply for access to subsidised CGM and Flash CGM products through the National Diabetes Service Scheme (NDSS). Depending on individual circumstances, some people can access fully subsidised CGM products and others can gain access with a co-payment.

6 Pump it up

Although CGMs work well on their own, this technology combined with an insulin pump can be life-changing for someone living with type 1. CGM can communicate with the pump and insulin delivery is adjusted based on BGLs throughout the day. Although the cost of an insulin pump is prohibitive to many people (around \$8,500-\$10,000), many private health insurance policies will cover the cost. If you can't afford private health cover, organisations like the DANNI Foundation and JDRE provide funding for eligible families.

For more information:
ndss.com.au
danii.org.au
jdrf.org.au

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