In medicalthe emergency medical setting, it is crucial to detect hypoglycemia and identify the rootits cause of hypoglycemia on a prompt basis. With the aim of elucidating as rapidly as possible. To elucidate the characteristics of patients attending the emergency visits for hypoglycemic cases room with hypoglycemia, we performed the present study. Among those ambulanced patients brought by ambulance to our institution hospital from 1 March 1 2008 to 30 November 30-2012, patients of those with an initial blood glucose level <60 mg/dL were registered as the subjects. However, patients younger than 6 years of age having cardio-pulmonary with cardiopulmonary arrest were excluded. Age, gender The age, sex, blood glucose, hypoglycemia cause of hypoglycemia, symptoms, and outcomes of the study subjects, were investigated. As a result, of Among the total of 18522 cases 18,522 patients transported by ambulance, 488 (2.6%) were involved enrolled in this study. The mean age of the patients, 297 of which male, was 68.7±15.5 years-, 297 were male, and the mean of-blood glucose level was 34.9±15.7 mg/dL. The most commonly presented common presenting symptom was "altered consciousness," whereas while 60 patients had no symptoms. The cause of hypoglycemia causes included: Insulin in 74 cases, oral hypoglycemic medication in 69, chronic alcoholics alcoholism in 23, sepsis in 20, liver cirrhosis/failure in 17, malignant tumor in 16, malnutrition in 15, dumping syndrome in

4, endocrine disorders in 2, and other in 4. Significantly lower blood glucose levels were noted in the grouppatients with lowerimpaired consciousness levels (P<0.005). The incidence rate of hypoglycemic hemiplegia was 1.9-\(\frac{\pi}{\chi_0}\). The proportion percentage of patients without any symptoms was larger in the group with higher among those with hypoglycemia related to non-diabetic medical agent related medications than among those with hypoglycemia compared related to that with anti-diabetic medical agent related hypoglycemia medications (P<0.05). Five patients had non-reversible permanent neurologic sequelae. All of these 5-patients were aged 70 years or older, and 3 were on sulfonylurea agent treatment. therapy. All of the deaths following hospitalization were from occurred in the group of with hypoglycemia due to non-diabetic $\frac{\text{agent}}{\text{medications}}$ (N = 24), and the death rate in this group was 23.9%. The incidence rate of Hypoglycemia caused by non-diabetic medical agent-related hypoglycemia was medications accounted for 41.2% among of the hypoglycemic eases ambulanced patients arriving by ambulance. Many of these patients had markedly marked disturbance of consciousness disturbance and all of the post-hospitalization deaths were derived from after admission occurred in this group. Non-reversible Irreversible neurologic sequelae were constantly often seen in elderly treated with a sulphonylurea. With the incidence rate of patients on sulfonylurea therapy. Since hypoglycemic hemiplegia beingoccurred in 1.8%, due cautions caution is required

for differentiation of hypoglycemia from stroke are recommended in these patients.

