

Schoolies Week

The tradition of young people going away with their friends for a week after their final year at school causes anxiety for many parents.

If you are a parent of a teenager with diabetes heading for schoolies week, this anxiety can be greater. Often this is the first time your teenager will be away from home without you and without adult supervision. It is important to ensure that teenagers who are heading to 'schoolies' week receive education and advice on how to manage the following issues:

- alcohol consumption
- management of diabetes during a hang-over
- sexual issues and general safety relevant to all teenagers (including drug taking)

Preparing your teenager on how to deal with these issues means they will be better equipped to deal with them appropriately if they arise. Ideally your teenager should receive education and advice around the issues of 'schoolies' week from their diabetes educator or diabetes doctor before they go.

Most teenagers with diabetes attend schoolies week with no adverse consequences from their diabetes.

Alcohol Consumption

Underage drinking is illegal. However, all teenagers with diabetes who are consuming alcohol need to be aware of the following information:

- alcohol, particularly sweet alcohol drinks, can initially raise blood glucose levels (BGLs)
- alcohol inhibits glucose release from the liver, increasing the risk of delayed hypoglycaemia
- alcohol consumption can lead to confusion, which may reduce a teenager's ability to manage a hypoglycaemic event ('hypo')
- a teenager having a 'hypo' can behave in a similar way to someone who has had too much to drink, it is possible friends/others may not recognise 'hypo' signs'.

The following precautions need to be taken by your teenager if they are consuming alcohol. They should:

- drink in moderation to avoid the possibility of vomiting
- avoid 'binge' drinking
- drink low-alcohol beer or wine rather than spirits
- wear or carry something which identifies them as having type 1 diabetes
- not substitute alcohol for food
- eat carbohydrate while consuming alcohol
- eat some carbohydrate before going to bed
- monitor BGLs regularly, particularly prior to going to sleep
- **never** stop insulin, even if nausea prevents them eating - Start on their 'Sick Day' Plan.

NOTE: even if 'hung over' and not eating any food, a reduced dose of insulin may be needed, but **never stop** taking insulin. During this time blood glucose testing needs to be carried out regularly. They should follow their 'Sick Day Plan'.

Drug Taking

Taking drugs, whether occasionally, or on a regular basis, is likely to impair decision-making about diabetes management. Specific issues with illicit drug taking for a teenager with diabetes are:

- most recreational drugs alter mood, perception and cognitive ability
- a decreased interest in routines, like managing insulin and eating
- an increased risk of a 'hypo' being ignored or misinterpreted
- reduced appetite, which can lead to hypoglycaemia (except when using marijuana)

Marijuana use can increase appetite (known as the 'munchies'). Marijuana has a powerful anti-nausea effect, and may disguise symptoms of diabetic ketoacidosis (DKA) such as nausea and vomiting. This can result in a teenager with DKA presenting for help later than they would have, which can be life threatening.

Further Information

For further information and advice for parents and carers on alcohol and drug consumption amongst young people visit the following websites:

<https://www.diabetesaustralia.com.au/Documents/MyD/Drug%20Use%20and%20Type%201%20Diabetes.pdf>

<http://www.adf.org.au/>