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Editorial Note

Editor Note on Hyperosmolar hyperglycemicProgram

smith A

Department Physical Therapy, University of sussex, England

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Introduction

Hyperosmolar hyperglycemic is a type of diabetes mellitus complication in which high blood sugar causes excessive osmolarity but no ketoacidosis. Dehydration, weakness, limb cramps, eyesight issues, and an altered degree of awareness are among symptoms. The onset usually takes a few days to a few weeks.Seizures, disseminated intravascular coagulopathy, mesenteric artery blockage, and rhabdomyolysis are all possible complications. A history of type 2 diabetes is the most important risk factor. It can happen to people who have never had diabetes before or who have diabetes type 1 on rare occasions. Infections, strokes, trauma, some drugs, and heart attacks are all potential triggers. Blood tests reveal a blood sugar level of more than 30 mmol/L (600 mg/dL), an osmolarity level of more than 320 mOsm/kg, and a pH level of less than 7.

Treatment generally involves intravenous therapy which It is a medical procedure that involves directly injecting fluids, drugs, and nutrients into a person's vein. Intravenous adm nistration is widely used to rehydrate or supply nutrients to patients who are unable to take food or drink through their mouth. It can also be used to treat electrolyte imbalances by administering drugs or other medical therapies such as blood products or electrolytes. Intravenous therapy has been attempted as early as the 1400s, but the practice did not become common until the 1900s, with the development of safe and successful procedures.

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***Corresponding author:** Smith A, Doctor of Physical Therapy, England Tel: +1801 8270200; E-mail: nathan@totalrehabclinics.com

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