

**BLOOD GLUCOSE SCREENING IN HEALTHY NEONATES**

Dear Sir,

I read the recent publication on screening for blood glucose in neonate<sup>(1)</sup> with great interest. Kayiran and Gürakan concluded that “glucose strips and glucose meters are useful only as screening devices for neonatal hypoglycaemia, and a screening cut-off value must be established.”<sup>(1)</sup> Indeed, this is not a new finding. In the report by Hoseth et al, a similar conclusion was made.<sup>(2)</sup> In addition, the authors also noted that “biochemical thresholds for hypoglycaemia do not seem to be of practical importance.”<sup>(3)</sup> However, previously published studies have indicated its use in screening.<sup>(4)</sup> An interesting point concerns the trend of overestimated blood glucose<sup>(4)</sup> from capillary blood sample analysis in the quoted studies.<sup>(1-3)</sup> Whether screening is used for healthy or non-healthy neonates, the control of the quality of analysers and the interpretation of capillary glucose results are very important.

Yours sincerely,

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**REFERENCES**

1. Kayiran SM, Gürakan B. Screening of blood glucose levels in healthy neonates. *Singapore Med J* 2010; 51:853-5.
2. Hoseth E, Joergensen A, Ebbesen F, Moeller M. Blood glucose levels in a population of healthy, breast fed, term infants of appropriate size for gestational age. *Arch Dis Child Fetal Neonatal Ed* 2000; 8:F117-9.
3. Diwakar KK, Sasidhar MV. Plasma glucose levels in term infants who are appropriate size for gestation and exclusively breast fed. *Arch Dis Child Fetal Neonatal Ed* 2002; 87:F46-8.
4. Harvey DR, Cooper LV, Fancourt RF, Levene M, Schoberg T. The use of dextrostix and dextrostix reflectance meters in the diagnosis of neonatal hypoglycemia. *J Perinat Med* 1976; 4:106-10.