During periods of flux, neurologic symptoms of hypoglycemia probably lag behind blood glucose levels. Herold⁴ found that the maximum change in neurologic response occurred 10 to 60 minutes after nadir glucose levels were reached. In addition, recurrent hypoglycemic episodes lead to a form of tolerance, with decreased production of insulin counter-regulatory hormones and reduced sympathetic response to hypoglycemia.⁵ This patient had attempted suicide at least once, recently, using insulin. And, based on his history of regular insulin use with poor, infrequent meals and recreational drug and alcohol abuse, he may also have had frequent episodes of hypoglycemia.

Conclusion

This patient's exceptional hypoglycemic tolerance may be explained by genetic predisposition, acquired tolerance and delayed onset of symptoms. Clinical findings may not always reflect serum glucose levels, and "occult" hypoglycemia may be more common than we think.

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