

UCL Hospitals cannot accept responsibility for information provided by external organisations.

Contact details

Muscle Channel Specialist Nurse National Hospital for Neurology and Neurosurgery Box 102 I ondon WC1N 3BG Switchboard: 0845 155 5000 / 020 3456 7890 Direct Line Telephone: 2020 3448 8009 Email: MuscleChannelNCG@uclh.nhs.uk Website: <a>www.uclh.nhs.uk/nhnn

The Nurse Specialist is available from 8.30am to 4.30pm Monday to Friday (excluding bank holidays).

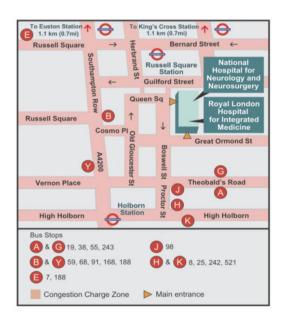
Where can I get more information?

Muscular Dystrophy UK is a charity for people with neuromuscular disorders, they provide information, advice and support for patients, carers and health care professionals.

Website: http://www.musculardystrophyuk.org/

Telephone: 0800 652 6352

If you need a large print, audio or a translated copy of this document, please contact the nurse specialist directly. We will try our best to meet your needs.



Publication date: January 2017 Date last reviewed: July 2018 Date next review due: July 2020 Leaflet code: UCLH / NHNN/ MUS/HPPDIET/1 © University College London Hospitals NHS Foundation Trust



Safety delivering top-quality patient **Kindness** care, excellent education Teamwork and world class research Improving

National Hospital for Neurology and Neurosurgery

Carbohydrate dietary advice for patients with Hypokalaemic Periodic **Paralysis**

Centre for Neuromuscular Diseases

This leaflet has been written by the Specialist nurse who works for the muscle channel service. The leaflet provides information about carbohydrate dietary triggers. The leaflet is for patients with muscle channel conditions who are seen at the National Hospital for Neurology and Neurosurgery. Patients' family or carers may also find this information helpful.

About the carbohydrate triggers in periodic paralysis

There are a number of patients with periodic paralysis who experience attacks of weakness following a meal with carbohydrates. This may be a meal eaten late in the evening which leads to an attack of weakness in the early hours of the morning. Attacks of weakness can also happen during the day after meals with high carbohydrate content.

The patients who experience attacks are ones who are sensitive to low potassium levels. Certain carbohydrates cause a surge in insulin (the hormone that helps to change the carbohydrate in food to a usable form in the blood, with any glucose (sugar) that is spare being stored for later use).

This surge in insulin can cause a drop in the potassium level in the blood. This potassium drop affects the ion channels, causing weakness of the muscles. This weakness is experienced as an episode of paralysis.

What sorts of carbohydrates are best to avoid triggering attacks?

It is useful to know which carbohydrates are your main triggers. Maintaining a food diary for a couple of weeks will help to identify these.

We advise patients to try and eat slow-acting (low glycaemic index - GI) carbohydrates as these take longer to break down and are less likely to cause a drop in potassium levels.

Foods that are high carbohydrates are:

Baguette, bagels, bread stuffing, cereals (Coco pops, corn pops, Crunchy Nut Cornflakes), dark rye bread, gluten-free bread/maize pasta/rice, white rice, Shredded Wheat, Sultana Bran, white bread, wholemeal bread, broad beans, jacket potatoes, mashed potato, parsnips, pumpkin, swede, dates, watermelon, doughnuts, French fries including frozen, fruit bars, honey, popcorn, rice cakes.

Examples of low GI carbohydrates are:

All-Bran, barley, buckwheat, bulgur wheat, oat bran, oats, seeded breads, sourdough rye, soya and linseed bread, toasted muesli baked beans, black eye beans, butter beans, chickpeas, kidney beans, lentils, small new potatoes boiled in skins, peas, soya beans

Fruits with a low GI include:

Grapefruit and its juice grapes, Kiwi fruit, mangoes, oranges peaches, pears, plums, prunes, strawberries, apples and bananas

Adjusting what and when you eat can have a noticeable effect on the frequency and duration of your attacks of paralysis.

Once you have kept your food diary for a couple of weeks, arrange a telephone review with the specialist nurse who will be able to discuss with you, where any adjustments can be made to help with your attacks.