

Insulin administration

Diana Piper and Jayne Fewings
Cedars Inn
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Methods of delivery

- Syringes
- Disposable pens
- Reusable pens
- Non-injection devices
- Insulin pumps
- (Inhaled)

Which Device

- Patient choice
- Patient confidence
- Manual dexterity
- Vision
- Type of insulin
- Consider potential of dose
- Cost
- Availability



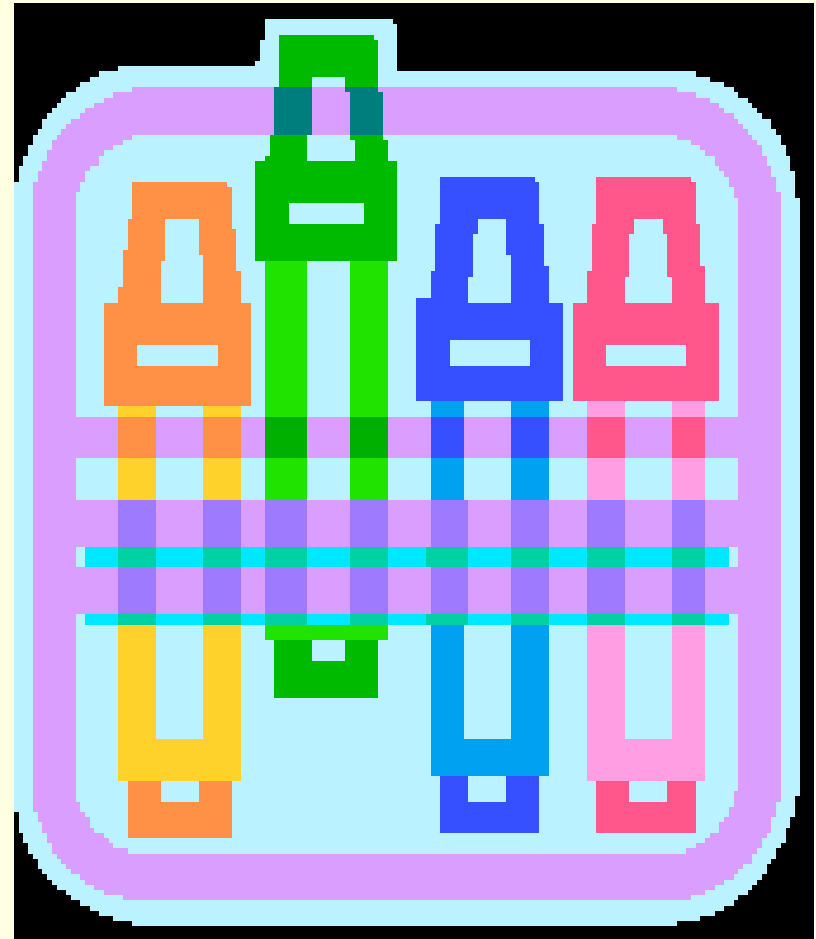
Needles and Syringes



- Often preferred by those having had diabetes for sometime
- Allows for free- mixing
- Not very portable
- 8mm or 12.7 mm needle length available

Disposable pens

- Easy to use
- Particularly good for people with poor manual dexterity or visual impairment
- Include Flexpen, Optiset, Solostar and Lilley Prefilled Pen
- Can limit choice of insulin available to use



Reusable Pens and Cartridges

- Generally more robust than disposable pens
- Have carrying cases
- Greater choice of insulin available
- Include Novopen 3, Luxura, Autopen, Opticlik

NovoPen®3



Other Insulin Delivery Devices

Innolet

- Disposable pre-filled device
- Large clear display
- Audible click for every unit dialled



Insulin Pumps

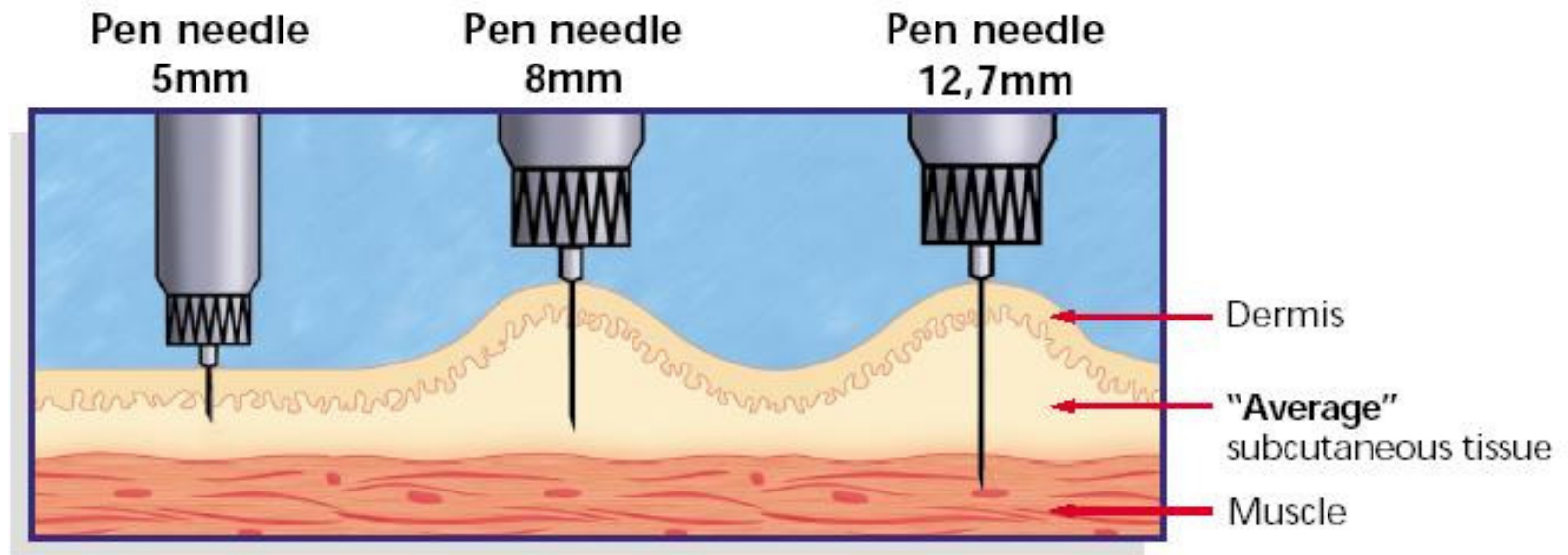
- Continuous subcutaneous insulin infusion
- Battery operated
- Programmable computer
- Basal insulin thorough the day
- Bolus insulin with meals
- Needles/catheters changed every 2-3 days



Pen needles

- Available in 5, 6, 8, 12 and 12.7 mm
- The shorter needle sizes reduce fear of injection and suit most people of any age or weight
- If longer needles are used then a pinch up is essential and a 45 degree angle should be considered
- Needles can be re-used but only a small number of times, if the patient chooses (NICE 2004)-product liability
- Some pens not compatible with all needles

Needle length



Recommendations

- Adults with diabetes who inject insulin should have access to the insulin injection delivery device they find allows them optimal well-being.
- Adults with diabetes who have special visual or psychological needs should be provided with injection devices or needle-free systems that they can use independently for accurate dosing.
- Insulin injection should be made into the deep subcutaneous fat. To achieve this, needles of a length appropriate to the individual should be made available.

Recommendations

- Adults with diabetes should be informed that extended-acting suspension insulin (for example isophane insulin) may give a longer profile of action when injected into the subcutaneous tissue of the thigh rather than the arm or abdominal wall
- Adults with diabetes should be recommended to use one anatomical area for the injections given at the same time of day, but to move the precise injection site around in the whole of the available skin within that area
- Disposal – Environmental Health 01271 38887

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