

How should I inject my insulin?

Where should I inject my insulin?

Your insulin should be injected directly into the subcutaneous fat, which is the medical term for the fat that lies immediately underneath the skin.

Why inject into subcutaneous fat?

The subcutaneous fat is not as sensitive to pain and it allows uniform absorption of the insulin.

What syringe should I use?

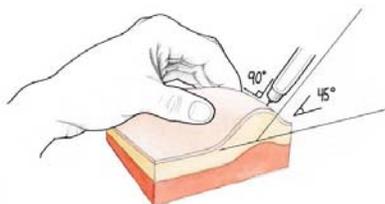
A syringe that is 4–6 mm long is usually long enough for most people. If you inject too deeply, there is a risk of injecting into a muscle, and then the insulin is absorbed too quickly.

Preparation of the pen before injection:

Prepare the insulin pen as instructed by the manufacturer. Remember that NPH insulin and pre-mixed insulin must be well-mixed so that the contents become cloudy/milky. This is done by rolling the pen/vial or cartridge between your palms about 10 times and turn the pen/vial or cartridge up and down about 10 times.

What should I do when injecting my insulin?

- Lift up a fold of skin with your thumb and forefinger. Angle the syringe at 45° against the flat of the skin and 90° against the surface of the skin fold.
- Inject the insulin slowly.
- When the entire dose has been injected, keep holding the insulin pen against the skin for a further 5–10 seconds. This stops the insulin from leaking back out again.



It is important that you use a new syringe and new injection site for each injection!

Fat cushions

If you inject yourself in the same place every time, this can form a “fat cushion”, also called lipohypertrophy.

You should therefore shift the injection site 1-2 cm between each injection to reduce the risk of fat cushions. You should also vary the injection site between the right and the left side. If you do develop fat cushions, avoid injecting into them, as the absorption of the insulin will be reduced. Fat cushions often disappear after a while if you avoid injecting into them.

Different types of insulin and choice of injection site

Different types of insulins lowers the blood glucose differently. The choice of injection site may affect the insulin absorption.

Rapid-acting mealtime insulin is usually injected into the belly, while basal insulin that is meant to work over a longer period is more often injected into the thigh/buttock.

Discuss with your doctor or diabetes nurse where you should inject your insulin.

Where should I inject my insulin?

Insulin should be injected into the subcutaneous fat of the belly, thigh or buttock, depending on the type of insulin.

Which syringe should I use?

A 4–6 mm syringe is usually long enough for most people. Use a new syringe for each injection.

Why should I vary the injection site?

Vary the injection site in order to avoid the formation of fat cushions.

If you have developed fat cushions, avoid injecting into them, and they will disappear after a while.

If you want more information than you find here, you can ask your doctor or nurse. You are also welcome to contact Medical Information at Lilly.

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