

# **Great Supporters Guide**

This item is only intended for people with diabetes (adults, adolescents and children aged 2 years and above) who have already been prescribed Abasaglar®



All Lilly Pens are recommended for use with Becton, Dickson and Company Pen Needles



### WELCOME TO GREAT SUPPORTERS

Great supporters can play such an important role in diabetes management and so we have created this booklet to help you support someone who is moving to insulin.

The **first** days for your loved one are really important, to get a good start with their insulin treatment.

- 1 Supporting someone with diabetes
- 2 Helpful information about insulin
- 3 Helpful information about hypos

## SUPPORTING SOMEONE WITH DIABETES

Moving to insulin can be a natural progression for many people with diabetes and does not necessarily mean they have done anything wrong, or a sign they haven't managed their condition well.

Diabetes is a progressive condition and it usually changes over time. As it changes, it is possible that the medicine needed to treat it will also change. Insulin is one of the medicines that is used to treat diabetes.

We all need insulin to function well. Sometimes our bodies can stop naturally producing insulin. If this is the case we need to provide our body with the insulin it needs.

Moving to insulin can understandably be daunting for both the person with diabetes and those closest to them. It may be the first time that someone has had to inject their medicine rather than take it in tablet form. However, many people find that taking insulin can quickly become part of their daily routine and can support their diabetes management to help them to live well.

# WHAT IS THE BEST WAY TO SUPPORT SOMEONE WITH DIABETES?

We are all individual people, we have different personalities and needs. Some people love to be fussed over and pampered, others are very independent and like to do things by themselves.

When you are thinking about offering your help and support there are a few things you may want to consider:

#### Is your help and support wanted or needed?

Just because you want to help someone, doesn't mean that your help is wanted or needed.

### Would they like some company at their appointments?

There is often a lot to take in when they see the doctor or nurse and someone to listen and remind them of what was said can be a great help.

### Are they managing the change emotionally as well as physically?

Sometimes moving to insulin can impact a person's emotional wellbeing and although they manage the physical aspects, such as injecting, they may emotionally struggle to come to terms with moving to insulin. Help is always at hand if they need it, so encourage them to speak with their doctor or nurse.

#### TIPS FOR SUPPORTING

If you think of something that you could do to help, ask them first rather than just do it.

#### **DO THINGS TOGETHER**

Sometimes change is easier if we are not the only ones. There are lots of positive things that you could do together such as:

- Share a healthy diet
- Get active even if that just means a little walk each day or every few days
- Take up a new hobby

#### **FIND OUT ABOUT INSULIN**

The person you support may not want to talk too much about their insulin and if this is the case it might help you to find out about it yourself. There are great resources online such as **diabetes.org.uk**. You could also speak to your GP practice and see if they run any diabetes education sessions.

#### **DON'T TAKE HARSH WORDS TO HEART**

Not everyone copes with change well and sometimes people say things they don't mean. Try not to take harsh words to heart in the early days but speak to someone you trust if the person you are supporting becomes angry or aggressive or if you are finding it hard to cope.

# 2 HELPFUL INFORMATION ABOUT INSULIN

#### How do you prepare the injection?

If you are supporting someone with their injections, it is recommended that you speak with their doctor or nurse first so you understand about the dose they require, how to adjust the dose and also the best time to give it.

#### **Useful Tips**

1. Store spare insulin in the fridge: Keep the pen they're currently using at room temperature. The insulin cartridges and pens can be stored for a maximum of 28 days up to 30°C and away from direct heat or light

**DO NOT** put insulin back into the fridge once it has been warmed to room temperature. Spare insulin cartridges and pens should always be kept in the fridge and **NEVER** in the freezer

- 2. Do be consistent: Injecting at the same time every day reduces the risk of having too much or too little insulin in their body
- 3. Do use a new needle every time: This reduces the risk of infections, skin damage and discomfort
- **4. Don't share pens:** Even if the needle has been changed, there is still a risk of infection

- 5. Do an air shot test: Pushing a test shot of insulin out of the needle ensures the pen is working properly before they inject
- 6. You can only dial up what's left: Be aware when their pen/cartridge is running out of insulin they may not be able to dial their full dose. They will need to either add the remainder of the dose from a new pen or cartridge, or, discard the remaining insulin and start with a full dose from a new pen or cartridge. Whichever they choose, it's really important to inject the full dose.
- 7. Don't force it: Forcing the dial on the pen could cause it to jam
- 8. Do rotate injection sites:

Frequently change their injection site (as advised by your doctor or nurse)

9. Don't pull the needle out too soon: Push the dose knob until you see 0 in the window, slowly count to 5.

If they withdraw the needle

If they withdraw the needle too early insulin can leak out, affecting their dose

#### 10. Problems with the device:

If no insulin comes out when they do the "Air Shot Test"?

 Dial another two units and try again up to four times in total.

#### Still nothing?

2. Try a new needle.

#### Still nothing?

3. If using a disposable pen, try using another one. If using a reusable pen, try a new cartridge.

#### Still nothing?

 4. Lilly make the pen and insulin, you can contact them on 01256
 315000; or consult the

"Instructions for Use"

# 3 HELPFUL INFORMATION ABOUT HYPOS

#### WHAT IS A HYPO?

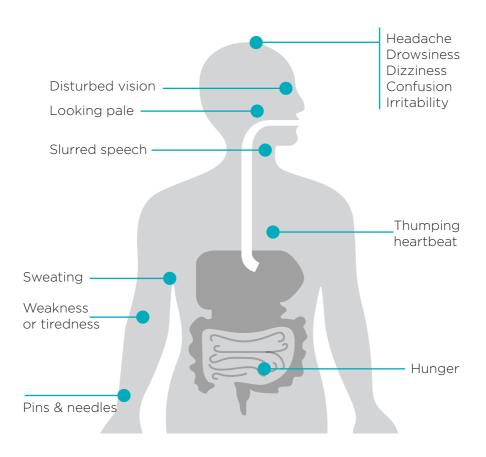
A blood sugar (glucose) reading of 4mmol/L and under, with or without symptoms, is known as hypoglycaemia (a"Hypo"). A hypo happens when blood sugars (glucose) fall too low. People feel different things when a hypo is starting. They may also find some of their hypos feel different from others.

#### A hypo can happen for lots of reasons including:

- Missing a meal or having one later than usual
- Having less food than usual
- Having more insulin than needed
- Being more active than usual

- Drinking alcohol
- Experiencing extremes in temperature
- Overused injection sites.

# HYPOS USUALLY HAVE WARNING SIGNS WHICH VARY FROM PERSON TO PERSON, BUT MAY INCLUDE:



#### What should I do if a person I am supporting is having frequent hypos?

Firstly if they're having frequent hypos, speak with your doctor or nurse as this shouldn't be happening and they can help.

If a hypo isn't corrected it can lead to more serious conditions such as loss of consciousness.

If they experience a hypo, they should deal with it by taking **15**-20g of quick acting sugar such as:

- 3-5 glucose or dextrose tablets
   a small carton of pure fruit juice

5 jelly babies

- 1-2 tubes of glucose
- a small glass of a sugary (non-diet) drink

Re-check their blood sugar levels 15 minutes after taking action to ensure they are rising. Repeat the above if their blood sugar is not above 5mmol/L.

If they are driving, it is important that you are aware of the guidelines provided by the DVLA. Visit www.gov.uk/diabetes-driving

If they are not about to eat a meal, ensure they eat 10-20 grams of slow acting carbohydrate, to maintain their blood glucose levels until they next eat - things like:

- Slice of bread
- 2-3 biscuits & milk

Fruit

Small banana

If the person is losing or has lost consciousness or is not making sense when you talk to them you should call 999 immediately.

#### Where to go for more information

### There is great information and advice from the Diabetes UK website (diabetes.org.uk)

You will also find stories and questions from people going on the same journey as you.

The Carers UK website offers support for carers and supporters (carersuk.org)

#### Information regarding driving:

www.gov.uk/diabetes-driving

These instructions do not replace the Patient Information Leaflet (PIL) and Instructions For Use (IFU) that came with the patient's medicine.

Please read the PIL and IFU carefully.

#### REPORTING SIDE EFFECTS

If you experience side effects, talk to your doctor or other healthcare professional. This includes any possible side effects not listed in the package leaflet. To report a side effect or product complaint with a Lilly product please call Lilly UK on 01256 315000. Additionally, reporting forms and further information can be found at UK: www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store.

By reporting side effects, you can help provide more information on the safety of medicines.

© 2020 Eli Lilly and Company. All rights reserved.

Abasaglar® (insulin glargine) is a registered trademark of Eli Lilly and Company.

KWIKPEN® is a registered trademark of Eli Lilly and Company.

Eli Lilly and Company Limited Lilly House, Priestley Road Basingstoke, Hampshire, RG24 9NI Telephone: 01256 315000

