CANINSULIN® Technical update



Converting a diabetic pet from a human lente insulin preparation to CANINSULIN®

Following the withdrawal of human lente insulin preparations (**Monotard, Humalin L**) from the market many veterinarians may wish to convert their clients' diabetic animals to **CANINSULIN**[®]. Below are some general guidelines to help ensure a smooth transition when converting a patient. Before starting it is useful to appreciate that there are several similarities as well as several differences between human lente preparations and **CANINSULIN**[®].

	Monotard Humalin L	CANINSULIN®
Suspension of amorphous (30%) and crystalline (70%) insulin	Yes	Yes
Intermediate acting (lente) preparation	Yes	Yes
Similar onset & duration of activity	Yes	Yes
Concentration	100 IU/mL	40 IU/mL
Syringes used	U-100, 1 mL	U-40, 1 mL

Even though the concentrations of the two products are different, one unit of the human lente preparation is equivalent to one unit of **CANINSULIN**[®], therefore any difficulties that may occur during any changeover period are likely to be related to dose calculation errors.

General Principles

- Start CANINSULIN® at the same dosage and frequency as used with the previous insulin (often this will be twice-daily therapy).
- Allow the patient to adapt to the new insulin preparation for at least two to four weeks if possible before altering the dose.
- To avoid dosing errors when administering **CANINSULIN**[®], it is highly recommended to use insulin syringes with 40 units per mL markings (U-40, 1 mL insulin syringes).
- U-40 insulin syringes are available for purchase through your local wholesaler.



Using CANINSULIN® with U-40 Insulin Syringes

Initiate treatment by starting patients on the same number of units (i.e. previous stable dose) on the new syringe.

 For example, if the current effective dose is 10 units (100 IU/mL insulin) on a U-100 insulin syringe twice daily, then the starting dose for CANINSULIN® is 10 units on the U-40 insulin syringe twice daily.

Note: the volume injected will appear larger (see diagram), however the less concentrated **CANINSULIN®** will encourage more accurate dosing.



10 units of 100 IU/mL in an U-100 insulin syringe OLD METHOD 10 units of 40 IU/mL CANINSULIN® in a U-40 insulin syringe NEW METHOD

10 units

Using CANINSULIN® with U-100 Insulin Syringes

For clients wanting to continue using the U-100 insulin syringes you will need to adjust the dose volume to account for the difference in concentration. Multiply the current number of insulin units by a factor of 2.5 to obtain the new volume of **CANINSULIN**[®] required.

- For example, if the current effective dose is 10 units (100 IU/mL insulin) on a U-100 insulin syringe twice daily, then the starting dose for the more dilute **CANINSULIN®** will appear as 10 x 2.5 = 25 units on the U-100 insulin syringe (or 0.25 mL) twice daily.
- To avoid this complicated calculation we again strongly advise using U-40 insulin syringes when switching clients to CANINSULIN®.
- In many cases the transition will be simple and uneventful however due to the nature of the disease and individual animal variation with regards to response to exogenous insulin, close monitoring & frequent client visits are recommended until regulation is adequate again.

Technical Support

For further information and advice on treating the diabetic patient, please contact our Technical Services department on Free Call 1800 033 461.

Websites

For vets www.caninsulin.com For pet owners www.pet-diabetes.com







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