

# How to Inject Insulin

When you are injecting insulin, you should aim to inject into the fatty tissue just underneath the skin.

If you think you are injecting into the muscle, you may want to change your technique or ask your GP to prescribe **shorter needles**.

The steps below are a broad guide to injecting insulin.

If you plan to change your technique, check with your healthcare team, diabetic nurse or consultant for their advice.

## How to perform an insulin injection

Firstly, prepare your kit.

You will need:

- An **insulin pen**
- Enough insulin inside to give the required dose
- A new pen needle
- Cotton wool or a tissue

Make sure you have your kit available at all times and if possible, inform your family as to its location.

If you suffer from a hypo, this will allow your family to act quickly.

## Injecting your insulin shot

To perform your insulin injection:

- Wherever possible, wash your hands with soap and water before injecting
- Put a new needle onto your pen
- Perform an 'air shot' of at least 2 units to clear any bubbles out of the needle – if you do not get a steady stream, repeat the air shot until you do get a steady stream
- Dial up your dose – how you do this exactly may depend on which pen you have
- Pick a soft fatty area to inject – tops of thighs, belly, bum and triceps (not always recommended for children or thinner people)
- Raise a fold of fatty flesh slightly between your thumb and fingers - leaving plenty of space between to put the needle in
- Put the needle in – if you are particularly slim, you may need to put the needle in at a 45 degree angle to avoid injecting into the muscle
- Push the plunger, to inject the dose, relatively slowly

- After the dose has been injected, hold the needle in for a good 10 seconds to prevent too much insulin from escaping out
- If any blood or insulin escapes, wipe this with cotton wool or a tissue
- Ensure that the used needle into a sharps bin is deposited into a **sharps bin**

## How to avoid pain when injecting insulin

Many diabetic patients are worried about the pain of injecting insulin. There are several methods that can help avoid or minimise pain when injecting.

- Making sure the muscles above which you're injecting are relaxed, this will allow for a better coverage of fat where you're injecting.
- Use insulin and a needle which is at room temperature
- Push the needle in quickly
- Try not to wiggle the needle as you're injecting or withdrawing the needle
- Always use a brand new needle

## Injections and bruising

You may notice a little blood leaks out after injecting.

This is not to worry about, it just means the needle has gone through a small blood vessel.

If this happens, you may notice a raised area of your skin from the blood underneath but this should ease down over the next few hours and you'll be left with a bit of a bruise for a few days.

## Rotate your injection sites to avoid 'lumpy' skin

If you tend to inject in the same places you may find that your flesh becomes less flexible than usual. This is called lumpy skin and means the **insulin** won't be absorbed as well.

Test your skin, where you inject, to see if you have lumpy skin - your flesh should feel as supple as it is on the rest of your body.

If it is not, you may need to rotate your injection spots better. Lumpy skin can also lead to the area of flesh sticking out more than usual, this is easier to notice on the arms and tummy. This is known as **insulin injection site rotation**.

Each of the main four areas (abdomen, buttocks, outer thighs and upper arms) should give a give a good area of flesh to inject into.

However, you may find you have a 'favourite part' of that area to inject into. If this is the case, try injecting into surrounding areas, picking a new spot each time.

One way to pick a non-lumpy area is to feel or squeeze the skin before **injecting insulin**. If it doesn't feel as supple as it could be, pick a different spot to inject into.

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