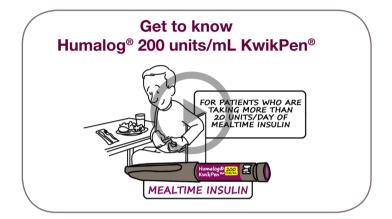
When counselling on or filling prescriptions for insulin, do you see patients taking more than 20 units of rapid-acting insulin a day?

For patients taking Humalog® 100 units/mL insulin, consider contacting the physician to recommend a switch to Humalog® 200 units/mL KwikPen®, as it allows patients to receive their insulin in half the volume compared to a 100 unit/mL insulin device.*

Consider Humalog[®] 200 units/mL KwikPen[®] as an option for patients like Peter[†], age 62 • Diagnosed with type 2 diabetes **Current regimen** 10 years ago Metformin: 1,500 mg/day; A1c currently 10% saxagliptin: 5 mg/day Mealtime insulin dose recently Basal insulin started 3 years ago; increased to 15 units with breakfast, current dose: 50 units once daily lunch, and dinner (45 units daily) Both Peter and his doctor think Mealtime insulin started 2 years ago; current dose: it might be time to consider 15 units with breakfast, lunch, and dinner (45 units daily) another option Tests his blood sugar three times daily ٥ He's showing symptoms of hyperglycemia

Watch a short video to learn about dosing Humalog[®] 200 units/mL KwikPen[®]



Any change of insulin may result in the need for a change in dosage and should be made cautiously, and only under medical supervision. Humalog® 200 units/mL KwikPen® is reserved for the treatment of patients with diabetes requiring daily doses of more than 20 units of rapid-acting insulin.

Indication:

HUMALOG (insulin lispro injection), HUMALOG MIX25 (25% insulin lispro injection, 75% insulin lispro protamine suspension), and HUMALOG MIX50 (50% insulin lispro injection, 50% insulin lispro protamine suspension) are indicated for the treatment of patients with diabetes mellitus who require insulin for the maintenance of normal glucose homeostasis. HUMALOG insulins are also indicated for the initial stabilization of diabetes mellitus. HUMALOG is a short acting insulin analogue and is for use in conjunction with a longer acting insulin, such as HUMULIN N (insulin isophane (rDNA origin) NPH), except when used in a subcutaneous insulin infusion pump.

HUMALOG 200 units/mL KwikPen (insulin lispro injection) is reserved for the treatment of patients with diabetes requiring daily doses of more than 20 units of rapid-acting insulin.

Contraindications:

- Episodes of hypoglycemia
- Patients sensitive to insulin lispro or its excipients

Most serious warnings and precautions:

Hypoglycemia: Uncorrected hypoglycemic or hyperglycemic reactions can cause loss of consciousness, coma or even death.

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Other relevant warnings and precautions:

- Hypokalemia may be relevant in patients who are on potassium lowering drugs or losing potassium through other means
- Stress and concomitant illness may change insulin requirements
- To avoid transmission of disease, a cartridge or prefilled syringe should not be used by more than one person
- Any rapid- or short-acting insulin formulation should be used with caution in patients with gastroparesis
- The combination of insulin with a thiazolidinedione is not indicated for the treatment of type 2 diabetes mellitus
- Patients taking a HUMALOG insulin may require a change in dosage from that used with their usual insulins
- Hypoglycemia may occur if the insulin dose is too high in relation to insulin requirement
- Hyperglycemia may occur in conditions of inadequate dosing or discontinuation of HUMALOG and if left untreated may lead to diabetic ketoacidosis or coma which are potentially fatal
- Impaired hepatic function may require careful glucose monitoring
- Local/systemic allergic reactions
- Antibody production may cause hypo- or hyperglycemia in very rare cases
- Renal impairment may reduce insulin requirements
- · Patients should be fully informed about potential advantages and disadvantages of HUMALOG
- Insulin requirements may vary during trimester in pregnant women
 - The use of HUMALOG in nu en has

- Give within 15 minutes before a meal; when necessary, HUMALOG may be given within 20 minutes of the start of the meal.
- HUMALOG 100 units/mL should not be diluted or mixed with any other insulin when used in a pump.
- Any change of insulin or human insulin analogue should be made cautiously and only under medical supervision.
- Do not use HUMALOG if it is not water clear and colourless or if it has formed a deposit of solid particles on the wall of the vial or cartridge.
- HUMALOG 200 units/mL should not be administered via a subcutaneous infusion pump or mixed with any other insulin.
- HUMALOG 200 units/mL cannot be transferred from the prefilled pen to other devices, such as a syringe. The markings on the insulin syringe will not measure the dose correctly. Overdose can result causing severe hypoglycemia.
- patients may require dose adjustments
- Dose selection for an elderly patient should take into consideration the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy
- Control of diabetes mellitus may be further complicated by diseases such as acromegaly, Cushing's syndrome, hyperthyroidism and pheochromocytoma
- Regular blood glucose self-monitoring should be considered to obtain optimal glycemic control; glycosylated hemoglobin should be measured every 3 to 4 months in all patients taking insulin products

For more information:

Please consult the product monograph at www.lilly.ca/HumalogPM/en for important information relating to adverse reactions, drug interactions, and dosing information which have not been discussed in this piece. The product monograph is also available by calling us at 1-888-545-5972.

* Comparative clinical significance has not been established. † Fictitious patient profile. May not be representative of all patients

Reference: 1. Humalog® Product Monograph, Eli Lilly Canada Inc., April 2, 2015

Access up-to-date product information, patient support resources, and find answers to medical questions at

LillyPro.ca



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lin lispro (rDNA origin) injection





