

Introduction

Insulin Initiation is done in T2DM on the principle of “Fixing Fasting First” for a better glycemic control. We optimize the dose of Glargine by targeting the Fasting Blood Glucose.

Aim:-1. To determine the ideal time of measuring the Fasting blood glucose.

2. To optimize the dose of glargine for targeting the Fasting blood glucose with the help of Flash Glucose monitor

Materials and Methods

Inclusion criteria: Type 2 Diabetes \geq 5 years; on basal insulin-Glargine; HbA1c 7-8.5% and FBS $>$ 130 mg/dl. These patients were duly examined, history was taken. They were explained about FGM and consent was taken. They were advised SMBG twice daily. The patients were called on 1-5-8-11-14th day. Exclusion criteria:-type 2 diabetes patient with uncontrolled glycemic control, FBS $<$ 130mg/dl, HbA1c $>$ 8.5%, pregnant patients, critically ill patients.

Results

300 patients were studied (210-female; 190-male) over a period of 18months. There were 26 drop outs.

108 patients were found to have mild nocturnal hypoglycemia (asymptomatic) between 3-5am. 78 patients had incompatibility between their SMBG FBS and FGM FBS reading timings.

80 patients taking glargine in morning had higher fasting. Changing the time of the insulin injection gave us the target fasting reading without increasing the dose.

Conclusions

Glargine dose to be optimized by checking FBS between 6-7am. Whenever fasting is high before increasing glargine simultaneously check the 3 -5am sugar. The best time of giving glargine is evening in comparison to morning.