

LOOKING AFTER YOUR FINGERS AND INJECTION SITES

Credentialed Diabetes Educator **Suzanne Leahy** shares some tips on how to keep your skin healthy and reduce damage, pain and discomfort from finger pricks and injections.

Some people with diabetes check their blood glucose on average five times per day. This of course will vary on the type of diabetes you have and what medications or insulin you take to look after your blood glucose levels. If you finger prick to check blood glucose levels you could potentially be checking over 1,000 times per year which can be damaging to your fingers. Likewise, when on insulin you can potentially be injecting a needle anywhere from 365 to over 1,800 times per year.

New technology such as the Libre Flash Monitor, continuous glucose monitoring and insulin pump therapy have helped reduce finger prick checking and injections but not completely eliminated the need for both.

Looking after your fingers and injection sites is an important part of looking after your diabetes as your fingers can get sore, calloused and bruised. Knowing what to look for and how to reduce damage, pain and discomfort will ensure your skin remains healthy.

Here are some tips to help improve finger health:

TIP 1

It is best to prick your fingers on the side rather than the 'pad' of your fingers.

WHY?

You have fewer nerve endings on the sides of your fingers so you won't develop as much scar tissue (damaged skin). Pain and discomfort will also be reduced. ➔





TIP 2

It is recommended that your lancet is changed every time you prick your finger but in reality most people don't. Try and get into the habit of changing your lancet daily at a minimum.

WHY?

Using a dull or blunt needle tears at the skin instead of making a clean hole which can cause pain and discomfort and eventually lead to callous formation and black spots (bleeding/bruising).

TIP 3

Try not to inject the lancet too deep into your finger. Set the depth between two and four on your lancet device.

WHY?

Most lancets are spring-loaded which makes the needle slam against your finger. If the needle goes too deep it can cause damage and black spots (bleeding) under the skin. If you already have calluses and black spots you will have to keep increasing how deep the needle needs to go, making the problem even worse.

TIP 4

Find it difficult to draw blood during the cold winter months?

Warm your hands first to increase blood supply to the finger tips. Wash them in warm water then hang your hand down to allow the blood to pool in the finger tips. Try not to squeeze vigorously to get enough blood as this can prevent flow, try 'milking the finger' instead – squeeze from the base and move up the finger.

Some blood glucose meters can draw blood from other parts of the body. Discuss your options with your diabetes team.

REMEMBER

- ✓ Always wash your hands before checking your blood glucose level
- ✓ Change your lancet more frequently, preferably after every blood glucose check, or at a minimum of once per day
- ✓ Use the sides of your fingers
- ✓ Use all of your fingers, don't just favour one finger
- ✓ Check how deep the needle is set to go into your finger

LOOKING AFTER INJECTION SITES

Injecting your insulin into the same area most of the time may cause hard lumps (extra fat deposits) to develop. These lumps can change the way your insulin is absorbed making it harder to look after blood glucose levels.

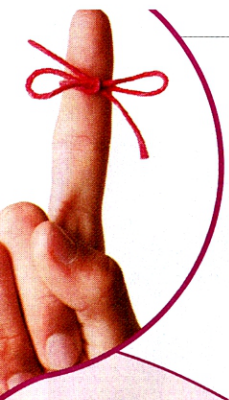
Here are some tips to keep injection sites healthy:

TIP 1

Don't inject close to the belly button.

WHY?

It can be tougher to inject into the tissue around the belly button and insulin absorption may not be consistent. There are also many nerves and small blood vessels in this area.



FATTY LUMPS UNDER THE SKIN

Caused by: Using the same injection site too many times.

Complications: Unsightly, mildly painful and may change the way your insulin is absorbed, making it harder to look after your diabetes.

Prevention: Rotate injection sites every injection and use a new needle every time. Check your injection sites by rubbing your fingers over the skin, if any hard lumps can be felt stay away from using this area to inject.

TIP 2

Change your pen needle with every injection.

WHY?

All needles used for injecting insulin are designed for one use only. Using a blunt needle will cause discomfort and bruising.

TIP 3

Inject insulin into the subcutaneous fat layer (the layer of fat that sits just below your skin).

WHY?

Insulin must be injected into the fatty layer of the abdomen or thigh, buttocks or back of the arms to ensure it is absorbed at the correct rate.

TIP 4

Rotate your injection sites.

WHY?

It is alright to use one site (such as your abdomen) but you must change the spot you inject into each time. This will help prevent hard lumps and a build-up of fatty tissue (lipohypertrophy). It is important to note that insulin is absorbed from the abdomen the fastest followed by the arms, thighs and the buttocks. Exercising can increase absorption from the arm or leg after injection.

TIP 5

Don't inject cold insulin

WHY?

Insulin should be injected at room temperature, between 4 and 25C. Cold insulin can cause pain, discomfort and fatty lumps. Insulin not in use should be stored in the refrigerator and will last until the expiry date on the vial or pen. Insulin currently being used will last at room temperature for 28 days.

TIP 6

Choose a needle length that is comfortable for you.

WHY?

It doesn't matter what length needle you use as long as it's comfortable. The good news – in most cases the shorter needles are often better. While the fat layer varies from person to person the skin thickness is the same. Choose a needle from 4mm up to 8mm.



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