NHS
Suffolk and
North East Essex
Integrated Care Board

Emergency Management of Insulin Unavailability in Primary Care

This guidance MUST only be used in an emergency when the patient's current insulin is unavailable.

Insulin Type	Initial Insulin Unavailable ⟷	Agreed Substitute Insulin*
Rapid Acting Human insulin analogues	Apidra®(insulin glulisine) cartridge/SoloStar Fiasp®(insulin aspart) cartridge/FlexTouch NovoRapid®(insulin aspart) cartridge/FlexTouch	**Trurapi® (insulin aspart) cartridges/SoloStar**
	Humalog®100units/ml (insulin lispro) cartridge/KwikPen	**Admelog® 100units/ml (insulin lispro) cartridges/ SoloStar**
	Humalog®200units/ml (insulin lispro) KwikPen	**Note change in strength** **Admelog® 100units/ml (insulin lispro) cartridges/ SoloStar** *at same units dose* **Humalog®100units/ml (insulin lispro) cartridge/KwikPen** *at same unit dose*
Soluble Insulin	Hypurin Porcine Neutral® (insulin soluble porcine insulin) vials/cartridges	**Actrapid® (insulin soluble human) vial**
Isophane Insulin	Insulatard® (isophane human) cartridge Hypurin Porcine Isophane® (porcine insulin) vials/ cartridges	**Humulin I® (isophane human insulin) vials/cartridges/KwikPen**
Insulin detemir	Levemir® (insulin detemir) cartridge/FlexPen	
Biphasic Insulin (intermediate acing with rapid acting)	Hypurin Porcine 30/70® (30% soluble porcine insulin & 70% isophane porcine insulin) vials /cartridges	**Humulin M3® (30% soluble human insulin & 70% isophane human insulin)**
	Humalog Mix25® (25% insulin lispro & 75% insulin lispro protamine) cartridge/ KwikPen Humalog Mix50® (50% insulin lispro & 50% insulin lispro protamine) cartridge/ KwikPen	**NovoMix 30® (30% soluble insulin aspart & 70% insulin aspart protamine) cartridge/ FlexPen**
Long-acting Human Insulin analogues	Tresiba® 200 units/ml (Insulin degludec) FlexTouch	**Note change in strength** **Tresiba® 100 units/ml (insulin degludec) FlexTouch** *at same dose*
	Abasaglar®(insulin glargine) cartridge/ KwikPen Semglee® (insulin glargine) pre-filled pen	**Lantus® (insulin glargine) cartridge/ SoloStar**

Guidance for Community Pharmacies

Where community pharmacies are unable to obtain the patient's current insulin due to unavailability, please refer to the substitution list and inform the GP what is available.

Substitution General Guidance for GPs

- Substitutions of patient's current insulin therapy for another product should be avoided if at all possible and should only be considered if a supply is not available i.e. the patient will run out or it is required for initiation.
- When making a substitution for a different insulin species **consider a 10-20% dose reduction** to avoid hypoglycaemia. This is particularly important if switching from an animal species to a human species.
- Patient should be encouraged to test using capillary blood glucose four times a day with any change of insulin product.
- Patients should be encouraged to contact their specialist diabetes teams with any questions and for support if required.
- Pharmacists will require a new script for the substituted insulin. Include information the switch is temporary
- Liaise with the specialist teams to confirm if the patient should be changed back to original insulin once stocks return to normal.

Written by SNEE Medicines Optimisation Team Date: March 2023, Updated May 2023 Approved by IMOC Date: March 2023 Review Date: March 2025

- ***If the 'agreed' substituted insulin is unavailable, then the insulin can be substituted with any within the category. Where the insulin is porcine, please liaise with the diabetes services for alternative.** Please contact the paediatricians once an alternative has been sourced for further clinical advice in paediatric patients.

Final