

DIABETIC DRUGS – INSULINS

USED FOR TYPE I & SOME TYPE II DIABETES MELLITUS (DM)

Category	Example	Onset	Peak	Duration	Comments All can cause Hypoglycemia or hyperglycemia
Rapid-acting	lispro (Humalog)	5-10 min.	30 min.-1.5 hr.	3-5 hr.	Give no more than 5-10 min ac
Rapid-acting	aspart (Novolog)	5-15 min.	1-3 hr.	3-5 hr.	Give no more than 5-10 min ac
Rapid-acting	Regular insulin (Humulin R or Novolin R)	30 -60min.	2-4 hrs.	5-8 hrs	Give no more than 30 min ac
Intermediate-acting	NPH (N) insulin – Humulin N or Novolin N)	1.5 hrs.	4-10 hrs.	14 hr.	Cloudy appearance Do not shake, roll between palms
Long-acting	Insulin glargine (Lantus)	1 hour	Steady, no peak	24 hours	Do not mix with any other insulins

When mixing insulins, always draw up clear 1st, then cloudy, remember clear to cloudy

DIABETIC DRUGS – ORAL ANTIDIABETIC DRUGS
USED ONLY FOR TYPE II DIABETES MELLITUS (DM)

Category	Example	Action	Side Effects & Nursing Implications
Sulfonylureas*	chlorpropamide (Diabinese) glipizide (Glucotrol)	Cause pancreas to make more insulin	Hypoglycemia
Biguanides*	metformin (Glucophage)	Makes liver secrete less glucose & decreases sugar absorption from diet	GI S&S, May help with weight loss. Withhold if having tests using contrast medium
Alpha(α) glucosidase inhibitors*	acarbose (Precose)	Prevent breakdown of sugar & carbs in GI tract, slowing their absorption. Decreases blood glucose pc	Flatulence, diarrhea Must give glucose tabs, milk or dextrose for hypoglycemia, not sugar (sucrose)

*The name of the oral drug categories will not be asked on a test or quiz, but the drugs, action and side effects/nursing implications may be asked.