

Management of your Diabetic Cat

The insulin must be kept refrigerated. Mix the insulin well by rolling the bottle in your hands before withdrawing the insulin dose. Avoid air bubbles. Syringes can be used up to 4 times before being discarded, but must be kept refrigerated as well.

Feed two equal meals each day twelve hours apart. This should be done ½ hour before the insulin is given. This allows the animal's blood sugar to rise as the insulin you gave is absorbed from the injection site. No table food should be given and treats should be minimized.

A canned low carbohydrate, high protein food should be fed to your cat. The ideal is Purina DM but there are some over the counter foods that can work for some cats. A list has been provided. If your cat is not eating well, only give half the regular insulin dosage and call your veterinarian. If your cat is not eating at all, do not give the insulin and call your veterinarian.

If any of the following are noted, give Karo syrup (light Karo) by mouth or smear it on the gums immediately: **Weakness, Incoordination, Muscle tremors, Shaking, Collapse, or Coma.** Administer the Karo syrup then seek veterinary attention immediately.

Rotation of injection sites helps to prevent soreness. Injections are most often given in the extra skin over the neck, but can be administered anywhere there is extra skin. Insulin is administered subcutaneously which means the skin is tented upwards and the small needle inserted between the raised skin and the underlying muscle. Injections are given as close to twelve hours apart with a variance of no longer than 1 hour either way. If the injection does not go as planned and you are unsure if your animal got all the insulin that it was supposed to, do not give more insulin, and just give the correct dosage at the next administration time. If you give too much insulin, call your veterinarian right away.

Diabetic animals are prone to infection so observe you animals for signs of abscesses in the mouth, sores on the skin, blood in the urine or straining to urinate, or vomiting and diarrhea.

_____ is starting out on _____ units of insulin twice a day. We should do a blood glucose level 3 days after he starts insulin and 6 hours after his injection. A week after he starts his insulin, he will need to be dropped off for the day so we can monitor his blood glucose level over an 8-10hour period. He may or may not need an adjustment of his insulin from there.