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**CENTRE FOR COMPANION ANIMAL HEALTH**  
**The School of Veterinary Science, The University of Queensland**  
[www.uq.edu.au/ccah](http://www.uq.edu.au/ccah); +617 3365 2122

**CATS**

**Dosing protocol for cats on glargine or detemir using daily home monitoring of blood glucose concentrations to adjust insulin dose**

Roomp K, RAND JS Evaluation of intensive blood glucose control using glargine in diabetic cats. Vet Intern Med 2008; 22 (3):770; Roomp K, RAND JS Factors predictive of non-insulin dependence in diabetic cats initially treated with insulin. Vet Intern Med 2008; 22 (3):791; and Roomp and Rand, unpublished data

Table 3A. Parameters for changing insulin dosage when using insulin glargine (Lantus) or detemir (Levemir) together with **home monitoring of blood glucose concentrations** in a protocol aimed at achieving intensive blood glucose control. Blood glucose should be measured at **least 3 times daily** with a glucometer. This protocol was tested in 55 diabetic cats for glargine and 18 diabetic cats for detemir. Owners measured blood glucose an average of 5 times daily and adjusted insulin dose based on the protocol. This has not been tested with veterinarian-measured blood glucose curves once every week or two weeks, and Table 2 is recommended if intensive home monitoring is not being performed.

NB. The blood glucose values were based on using portable glucose meters (Ascensia Contour, Bayer, Leverkusen, Germany; Accu-Chek Aviva, Roche Diagnostics, Basel, Switzerland) which use  $\leq 0.6 \mu\text{L}$  of blood per test. **These meters measure blood glucose concentration in whole blood and are calibrated for use with human blood.** Measurements from meters calibrated for human blood which provide plasma-equivalent values are approximately 10% higher.

NB. It is very important to note that blood glucose concentrations measured using a whole blood glucose meter calibrated for human blood may measure 30-40% lower in the low end of the range than glucose concentrations measured using a serum chemistry analyser or a plasma-equivalent meter calibrated for feline use. **Therefore, if using a meter calibrated for feline use (eg. AlphaTRAK, Abbott Laboratories, CA, USA), or a serum chemistry analyzer, add approximately 30 mg/dL (1.7 mmol/L) to the target glucose concentrations (see Table 3B).** For example, a target  $> 50 \text{ mg/dL}$  (2.8 mmol/L) becomes  $> 80 \text{ mg/dL}$  (4.4 mmol/L) when using a meter calibrated for feline use. **Instead of aiming for 50-100mg/dL (2.8-5.6 mmol/L), aim for 80-130 mg/dL (4.4-7.2 mmol/L [round numbers 4.5-7.0 mmol/L]). Meters calibrated for feline use may read higher or lower than the actual value, in contrast to consistently lower readings for meters validated for human blood.**

NB Mean median maximum dose in cats on detemir is about 30% less than for glargine (1.7 U/cat BID; range 0.5 to 4.0 IU versus 2.5 U/cat BID; range 1.0 to 9.0 IU BID).



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**TABLE 3A: Target blood glucose concentrations when using a blood glucose meter calibrated for human blood which measures glucose concentrations in whole blood. DO NOT USE THESE TARGET GLUCOSE CONCENTRATIONS IF USING A METER CALIBRATED FOR FELINE USE (eg. Abbott AlphaTRAK) or a serum chemistry analyzer – use table 3B instead).**

Dose increases are per injection per cat.

Parameter used for dosage adjustment	Change in dose
<b>Phase 1: Initial dose and first 3 days on glargine or detemir</b>	
Begin with 0.25 IU/kg of ideal weight BID OR If the cat received another insulin previously, increase or reduce the starting dose taking this information into account. Glargine has a lower potency than lente insulin and PZI in most cats.	
Cats with a history of developing ketones that remain >300 mg/dL (17 mmol/L) after 24-48 hours	Increase by 0.5 IU
If blood glucose is < 50 mg/dL (2.8 mmol/L)	Reduce dose by 0.25-0.5 IU depending on if cat on low (<3 IU/cat) or high dose (≥ 3 IU/cat) of insulin
<b>Phase 2: Increasing the dose</b>	
If nadir blood glucose concentration >300mg/dL (17 mmol/L)	Increase every 3 days by 0.5 IU
If nadir blood glucose concentration 200-300mg/dL (11-17 mmol/L)	Increase every 3 days by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If nadir blood glucose concentration < 200mg/dL but peak is > 200mg/dL (11 mmol/L)	Increase every 5-7 days by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If blood glucose is < 50 mg/dL (2.8 mmol/L)	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If blood glucose at the time of the next insulin injection 50-100 mg/dl (2.8-5.6 mmol/L)	Initially test which of the alternate methods is best suited to the individual cat: <b>a.</b> Feed cat and reduce the dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin <b>b.</b> Feed the cat, wait 1-2 hours and when the glucose concentration increases to >100 mg/dL give the normal dose. If the glucose concentration does not increase within 1-2 hours, reduce the dose by 0.25 IU or 0.5 IU (as above). <b>c.</b> Split the dose: feed cat, and give most of dose immediately and then give the remainder 1 to 2 hours later, when the glucose concentration has increased to >100 mg/dL. If all these methods lead to increased blood glucose concentrations, give the full dose if pre-insulin blood glucose concentration is 50-100 mg/dL and observe closely for signs of hypoglycemia. In general for most cats, the best results in phase 2 occur when insulin dose is as consistent as possible, giving the full normal dose at the regular injection time.



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<b>Phase 3: Holding the dose. Aim to keep blood glucose concentration within 50-200 mg/dL (2.8 – 11 mmol/L) throughout the day.</b>	
If blood glucose is < 50 mg/dL (<2.8 mmol/L)	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If nadir or peak blood glucose concentration > 200mg/dL (11 mmol/L)	Increase dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin and the degree of hyperglycemia
<b>Phase 4: Reducing the dose. Phase out insulin slowly by 0.25-0.5U depending on dose.</b>	
When the cat regularly (every day for at least one week), has its lowest blood glucose concentration in the normal range of a healthy cat, and stays under 100 mg/dL overall	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If the nadir glucose concentration is 40 - <50 mg/dL (2.2-<2.8 mmol/L) at least three times on separate days	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If the cat drops below 40 mg/dL once (2.2 mmol/L)	Reduce dose immediately by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If peak blood glucose concentration > 200mg/dL (11 mmol/L)	Immediately increase insulin dose to last effective dose
<b>Phase 5: Remission. Euglycemia for a minimum of 14 days without insulin.</b>	



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**TABLE 3B: Target blood glucose concentrations when using a blood glucose meter calibrated for feline use (eg. AlphaTRAK Abbott Laboratories).**

Dose increases are per injection per cat.

NB Mean median maximum dose in cats on detemir is about 30% less than for glargine (1.7 U/cat BID; range 0.5 to 4.0 IU versus 2.5 U/cat BID; range 1.0 to 9.0 IU BID).

Parameter used for dosage adjustment	Change in dose
<b>Phase 1: Initial dose and first 3 days on glargine or detemir</b>	
Begin with 0.25 IU/kg of ideal weight BID OR If the cat received another insulin previously, increase or reduce the starting dose taking this information into account. Glargine has a lower potency than lente insulin and PZI in most cats.	
Cats with a history of developing ketones that remain >300 mg/dL (after 24-48 hours)	Increase by 0.5 IU
If blood glucose is < 80 mg/dL (4.5 mmol/L)	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
<b>Phase 2: Increasing the dose</b>	
If nadir blood glucose concentration >300mg/dL (17 mmol/L)	Increase every 3 days by 0.5 IU
If nadir blood glucose concentration 200-300mg/dL (11-17 mmol/L)	Increase every 3 days by 0.25-0.5 IU depending on if cat on a low (<3 IU/cat) or high dose (≥ 3 IU/cat) of insulin
If nadir blood glucose concentration < 200mg/dL but peak is > 200mg/dL (11 mmol/L)	Increase every 5-7 days by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If blood glucose is < 80 mg/dL (4.5 mmol/L)	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If blood glucose at the time of the next insulin injection 80-130 mg/dl (4.5-7.2 mmol/L)	Initially test which of the alternate methods is best suited to the individual cat: <b>a.</b> Feed cat and reduce the dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin <b>b.</b> Feed the cat, wait 1-2 hours and when the glucose concentration increases to >100 mg/dL give the normal dose. If the glucose concentration does not increase within 1-2 hours, reduce the dose by 0.25 IU or 0.5 IU (as above). <b>c.</b> Split the dose: feed cat, and give most of dose immediately and then give the remainder 1 to 2 hours later, when the glucose concentration has increased to >100 mg/dL. If all these methods lead to increased blood glucose concentrations, give the full dose if pre-insulin blood glucose concentration is 50-100 mg/dL and observe closely for signs of hypoglycemia. In general for most cats, the best results in phase 2 occur when insulin dose is as consistent as possible, giving the full normal dose at the regular injection time.



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If nadir or peak blood glucose concentration > 200mg/dL (> 11 mmol/L)	Increase dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin and the degree of hyperglycemia
<b>Phase 4: Reducing the dose. Phase out insulin slowly by 0.25-0.5U depending on dose.</b>	
When the cat regularly (every day for at least one week), has its lowest blood glucose concentration in the normal range of a healthy cat, and stays under 130 mg/dL (7.2 mmol/L) overall	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If the nadir glucose concentration is 70 - <80 mg/dL at least three times on separate days (3.9-<4.5 mmol/L)	Reduce dose by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If the cat drops below 70 mg/dL once (4.5 mmol/L)	Reduce dose immediately by 0.25-0.5 IU depending on if cat on low or high dose of insulin
If peak blood glucose concentration > 200mg/dL (>11 mmol/L)	Immediately increase insulin dose to last effective dose
<b>Phase 5: Remission. Euglycemia for a minimum of 14 days without insulin.</b>	