

Mealtime Insulin Dosing for Type 1 Diabetes

John Pemberton

Diabetes Dietitian

Type 1 D since 2008

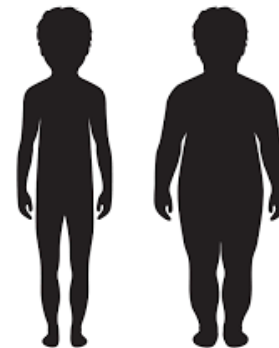
johnpemberton@nhs.net

(I may not reply as my kids come first, but I will if I can)



MY guiding principles & questions – number 1

- Normal is not natural (proven over millions of years of evolution)?
 - *Would my great grandmother recognise it as food?*
 - *Is today's body shape is normal or natural?*



MY guiding principles & questions

- Do I have skin in the game – Monkey see monkey do
 - *Am I walking the talk?*



MY guiding principles & questions

- Does my food environment betray my intentions?
 - Are my cupboards, fridge and lunchbox filled with normal or natural food?



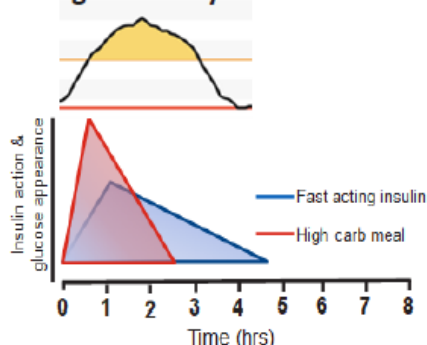
Mealtime Insulin for Type 1 Diabetes

What does the Insulin to Carb Ratio (ICR) actually cover?

Glucose from digested carbohydrate and the small amount of insulin required to use fat and protein effectively.

Fast acting mealtime insulin peaks after 60-90 minutes and lasts 4-6 hours

High carbohydrate meals



Glucose appearance peaks at 30-60 mins, lasts 3-4 hours

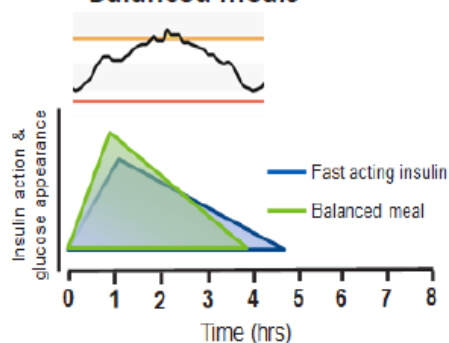
Carbs more than 55%

Breakfasts: Cereal with light milk, toast and jam, fruit bread
Meals: Jacket potato & beans, super noodles, waffles & hoops
Snacks: Cereal bars, biscuits, rice crackers, fat free yoghurt

How to better match insulin to a high carbohydrate meal?

1. Count carbs (g) within 10g accuracy & use ICR
2. Choose lower glycaemic index carb choices
3. Must be normal bolus 20 minutes before eating

Balanced meals



Glucose appearance peaks at 60-90 mins, lasts 4-5 hours

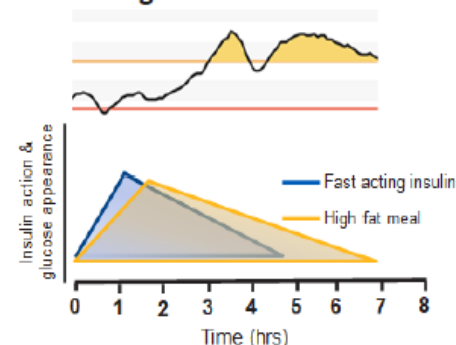
40-55% carbs, 20-40% fat & 10-20% protein

Breakfasts: Porridge with semi or full milk, egg on toast
Meals: Meat & potatoes & veg, jacket potato & cheese & salad
Snacks: Whole fruit with nuts, nut butter on toast, whole yoghurt

How to better match insulin to a balanced meal?

1. Count carbs (g) within 10g accuracy & use ICR
2. Normal bolus 20 minutes before eating

High fat meals



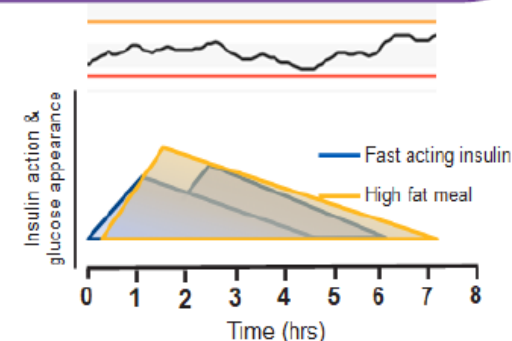
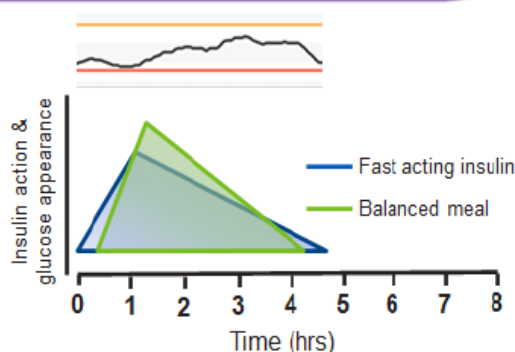
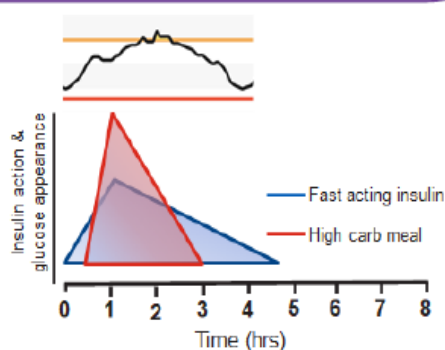
Glucose appearance peaks at 120-180 mins, lasts 6-9 hours

Fat more than 40g with at least 30g carbs

Pizza, takeaways, creamy curry, Sunday roast, English fry-up

How to better match insulin to a high fat meal?

1. Count carbs (g) within 10g accuracy & use ICR
2. Increase insulin by 25% (may need 17-124%)
3. Pump: 50% 20 minutes before, 50% over 120 mins
 MDI: 50% 20 minutes before, 50% in 60 mins
4. KISS method to adjust extra insulin and how to split



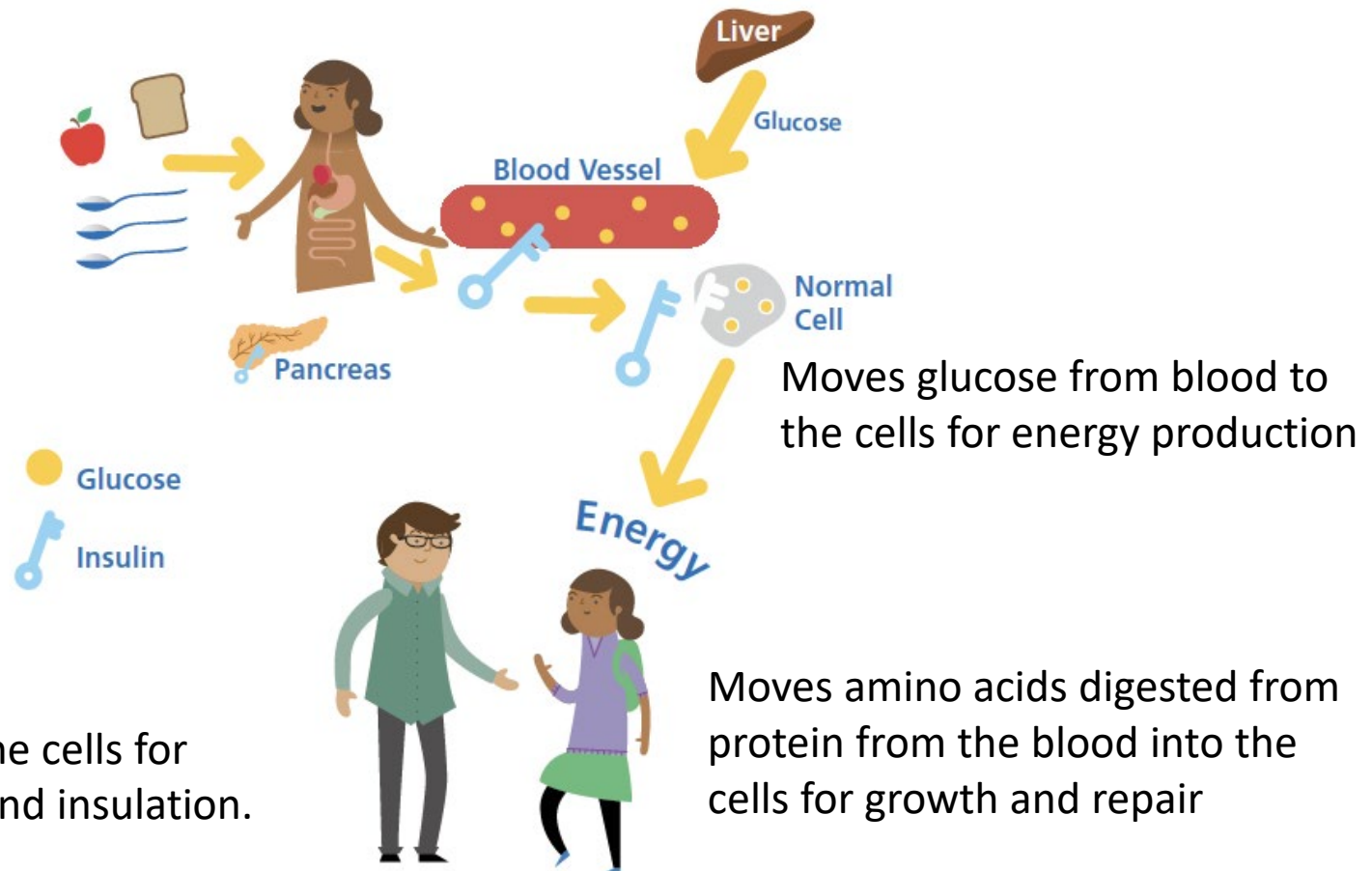
What does the Insulin to Carb Ratio (ICR) actually cover?

Glucose from digested carbohydrate and the small amount of insulin required to use fat and protein effectively.

Fast acting mealtime insulin **peaks after 60-90 minutes and lasts 4-6 hours**

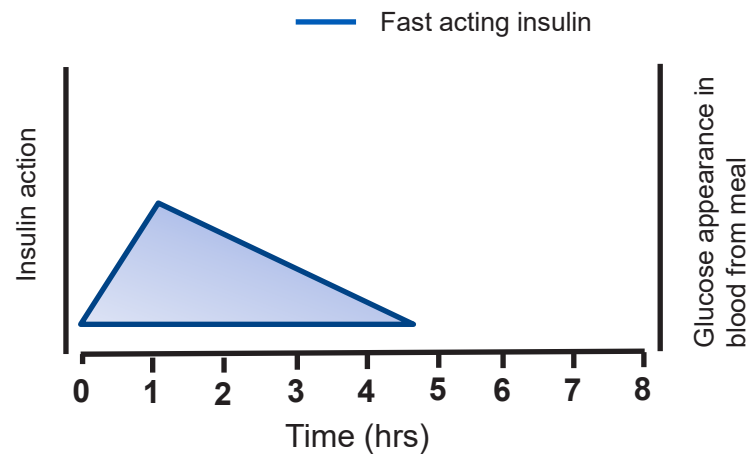
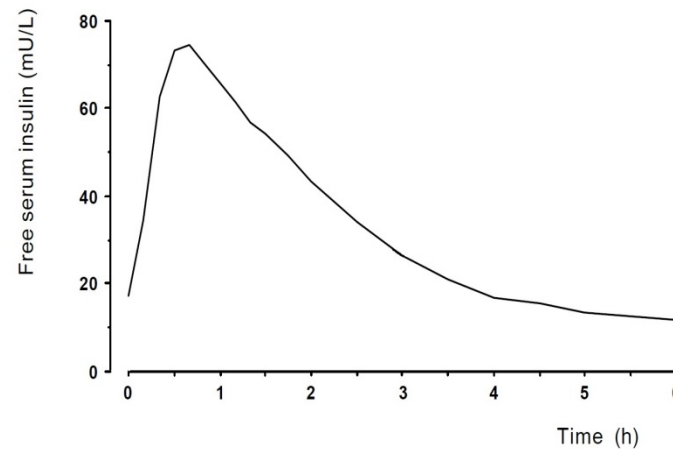


What does fast acting insulin do?



Fast acting insulin action profile (Novorapid, Humalog, Apidra)

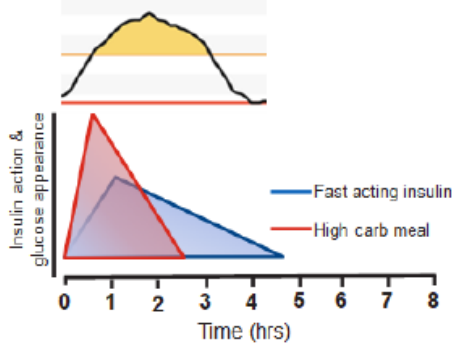
Fast acting insulin action profile



Fast acting Insulin at meal vs glucose appearance in the blood from different meals

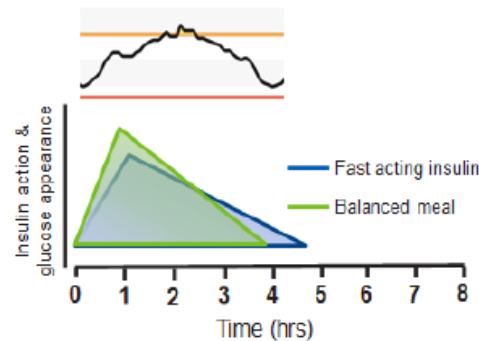
Fast acting mealtime insulin peaks after 60-90 minutes and lasts 4-6 hours

High carbohydrate meals



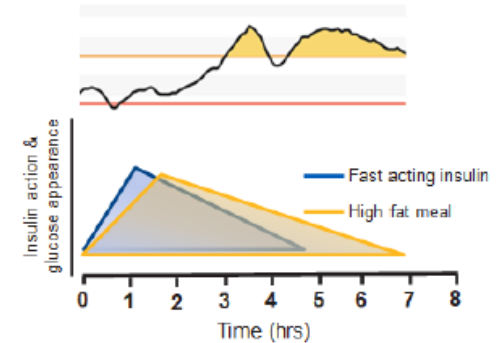
Very little fat to slow down carbohydrate absorption

Balanced meals



Just enough fat to slow down carbohydrate absorption to match insulin action

High fat meals

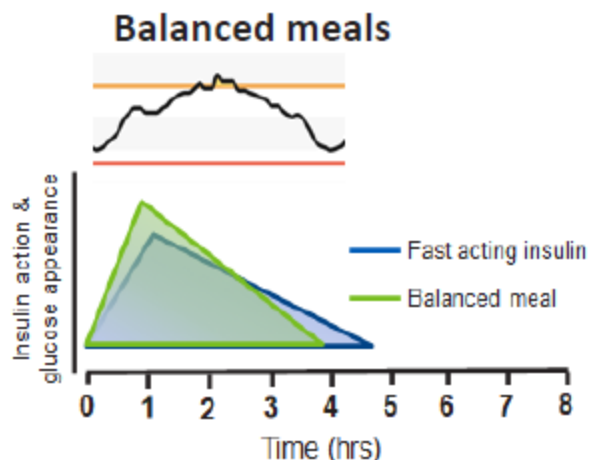


Too much fat slowing down carbohydrate absorption too much

This is a guide!

- Guidance based on the AVERAGE from research:
- Each person with Type 1 diabetes is unique
- EXPECT to adjust through trial and error
- Check with your health care team before trying
- This guide is for INFORMATIONAL PURPOSES ONLY
 - Discuss and share with Diabetes Team before trying

Infographic



Glucose appearance peaks at 60-90 mins, lasts 4-5 hours

40-55% carbs, 20-40% fat & 10-20% protein

Breakfasts: Porridge with semi or full milk, egg on toast

Meals: Meat & potatoes & veg, jacket potato & cheese & salad

Snacks: Whole fruit with nuts, nut butter on toast, whole yoghurt

How to better match insulin to a balanced meal?

1. Count carbs (g) within 10g accuracy & use ICR
2. Normal bolus 20 minutes before eating



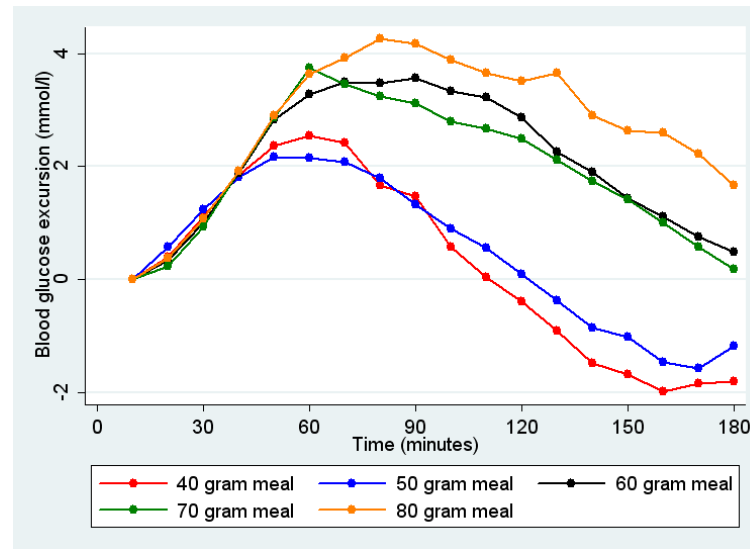


Balanced meals within 10g accuracy

40-55% carbs, 10-20% protein, 20-40% fat

The meal was a ham sandwich with cereal bar
(55% carbs, 12% protein, 33% fat)

20g difference is too inaccurate

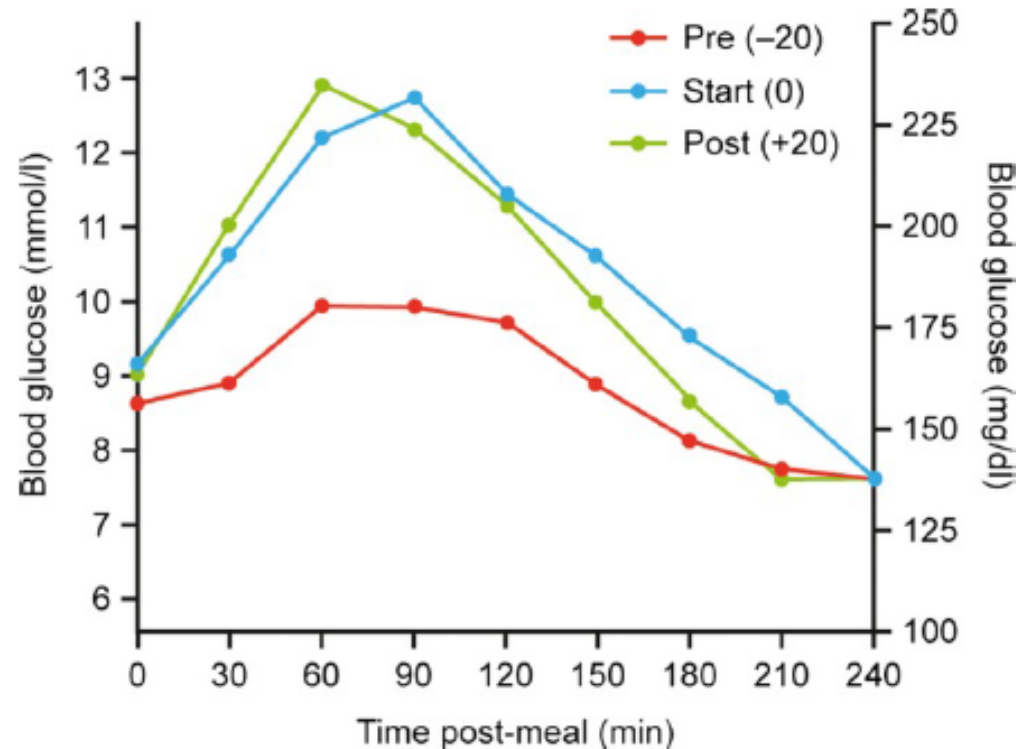


Diabet Med. 2012;29(7):e21-24





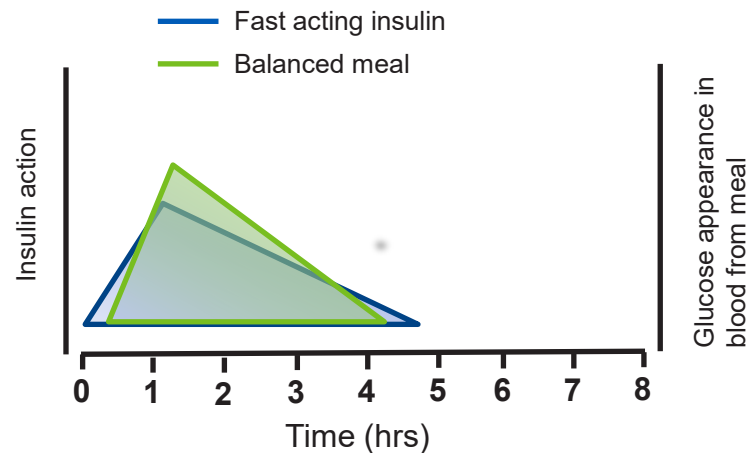
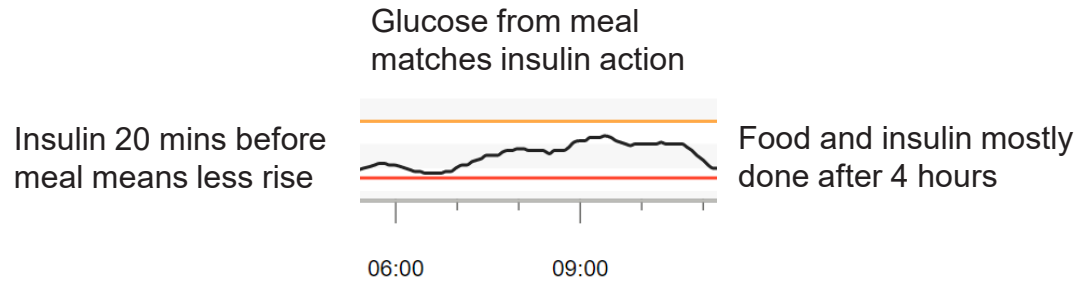
Why normal bolus 20 minutes before?



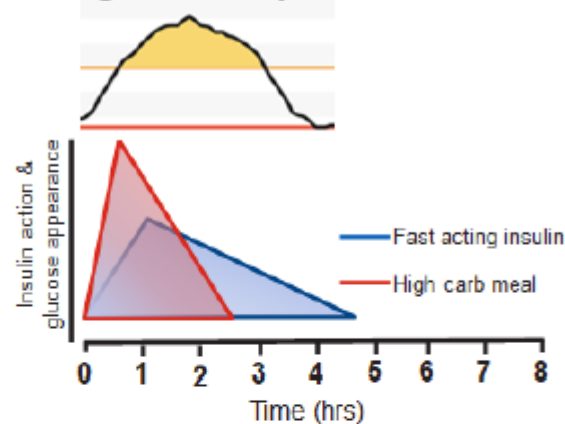
Diabetes Technol Ther. 2010;12(3):173–77.



Fast acting Insulin vs glucose appearance in the blood from a balanced meal



High carbohydrate meals



Glucose appearance peaks at 30-60 mins, lasts 3-4 hours

Carbs more than 55%

Breakfasts: Cereal with light milk, toast and jam, fruit bread

Meals: Jacket potato & beans, super noodles, waffles & hoops

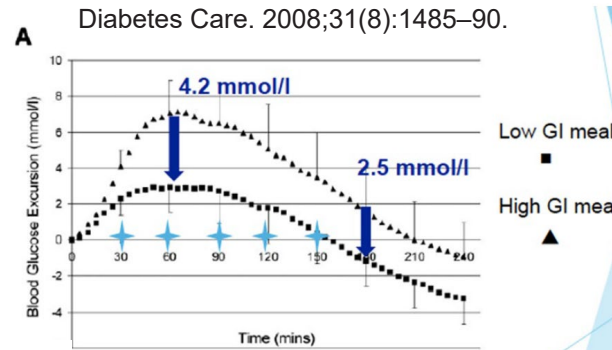
Snacks: Cereal bars, biscuits, rice crackers, fat free yoghurt

How to better match insulin to a high carbohydrate meal?

1. Count carbs (g) within 10g accuracy & use ICR
2. Choose lower glycaemic index carb choices
3. Must be normal bolus 20 minutes before eating



Choose lower glycaemic choices or exchange some carbs for protein & fat

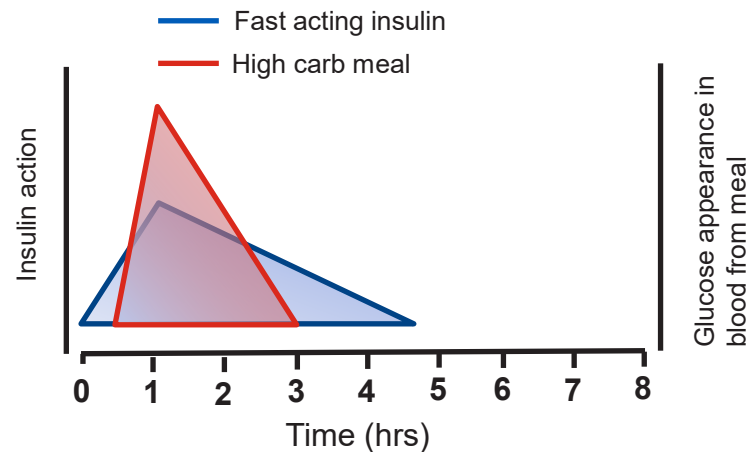
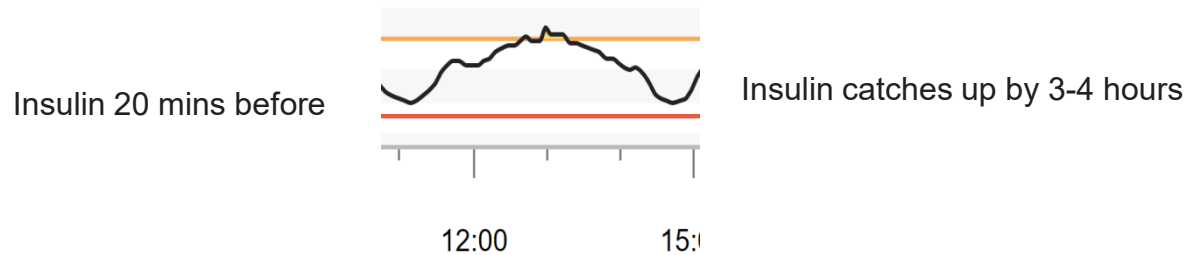


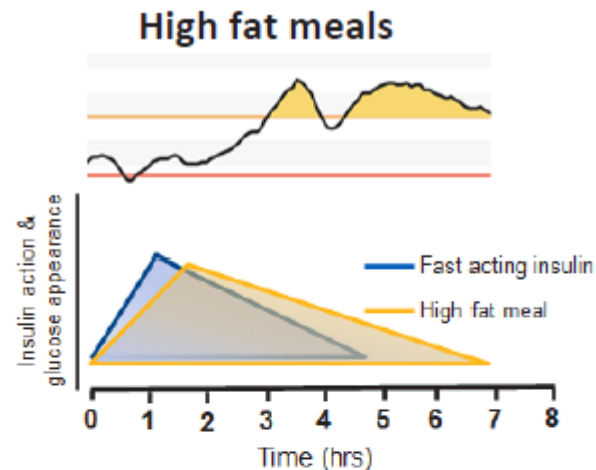
Meals high in carbohydrate and low in fat and protein that can make the glucose spike 1-2 hours after eating	How you exchanges some of the carbohydrate for fat and protein glucose spiking by adding fat and protein
Breakfasts	
Large Breakfast cereal with skimmed or semi skimmed milk	Medium breakfast cereal with full cream milk and a boiled egg.
Two toast with spread and jam or honey	One toast with spread and scrambled egg or mackerel or cheese spread
Croissant with Jam	Croissant with cream cheese
4 pieces of fruit	2 pieces of fruit with normal yoghurt
Lunches	
Two ham sandwich with low fat yoghurt and fruit	One cheese sandwich with full fat yoghurt
Tomato soup with 2 slices white bread and rice cakes	Tomato soup with one wholemeal bread with spread on small bag of crisps
Baked potato with spaghetti hoops	Sweet potato with spread and cheese
Evening meal	
Large white rice with curry	Basmati rice with curry and vegetables
Baked potato with beans - no spread	Baked potato with tuna mayonnaise
Mashed potato, baked beans and waffles	Mashed potato with sausages, vegetables and baked beans
Snacks	
3 Rice cakes	Small bag Corn or tortilla chips
Low fat snack bars	Nut based snack bars
Dried fruit	Nuts

Low GI cereals	Medium GI cereals	High GI cereals
All bran Oat bran Porridge (whole oats) Special K Oatibix Readybrek	Muesli (no added sugar) Mini wheats Rolled oats Sultana bran Shredded Wheat Fruit and Fibre	Cornflakes Instant porridge Coco Pops Weetabix Rice Krispies Cheerios Bran Flakes
Low GI Breads	Medium GI Breads	High GI Breads
Sourdough bread Soya & Linseed Granary Tortilla wrap Muffins (for toasting)	Oatmeal Pitta bread Wholemeal bread Chapatti Bagel	White bread French baguette Flatbread
Low GI Starchy Foods	Medium GI Starchy Foods	High GI Starchy Foods
Pasta /spaghetti (not overcooked) Gluten free pasta Cheese Tortellini Yam Rice noodles Quinoa, pulses Basmati rice Brown rice	Boiled potato Sweet Potatoes Easy cook American rice Wild rice Couscous	Mashed potatoes Baked potato Thai rice (Jasmine) Glutinous rice

Fast acting Insulin vs glucose appearance in the blood from a high carb meal

Glucose from meal is still too fast for insulin action but is much better





Glucose appearance peaks at 120-180 mins, lasts 6-9 hours

Fat more than 40g with at least 30g carbs

Pizza, takeaways, creamy curry, Sunday roast, English fry-up

How to better match insulin to a high fat meal?

1. Count carbs (g) within 10g accuracy & use ICR
2. Increase insulin by 25% (may need 17-124%)
3. Pump: 50% 20 minutes before, 50% over 120 mins
MDI: 50% 20 minutes before, 50% in 60 mins
4. KISS method to adjust extra insulin and how to split

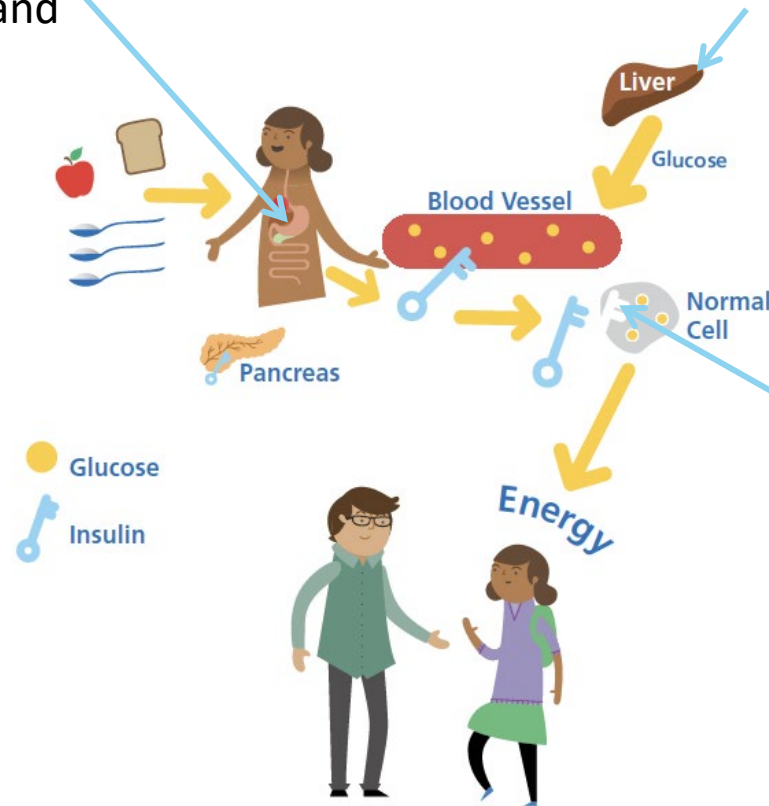




High fat with at least 30g carb meals

High fat meals really slows down how quickly the stomach empties and therefore the glucose appearance in blood stream.

If also high protein extra glucagon goes from the pancreas to the liver increasing glucose output



High level of fat in the blood stops the insulin working as effectively "Insulin Resistance"

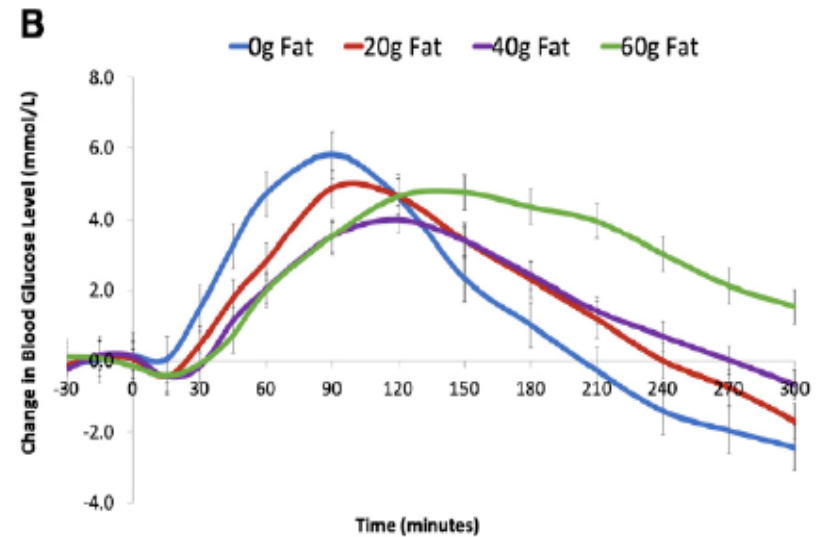




The high fat Avocado on bread study

The meals two slices of bread (45g carbs):

- 0g fat = Nothing
- 20g fat = one small avocado
- 40g fat = two small avocados
- 60g fat = three small avocados



Diabetes Care. 2020;43(1):59–66

How much extra insulin was needed and what split?

- 60g fat = 21% extra 63% before, 37% over 105 min



The high fat and protein Pizza study

The Pizza's

- LFLP Pizza = 50g carb, 9g protein, 4g fat
- HFHP Pizza = 50g carb, 36g protein, 44g fat

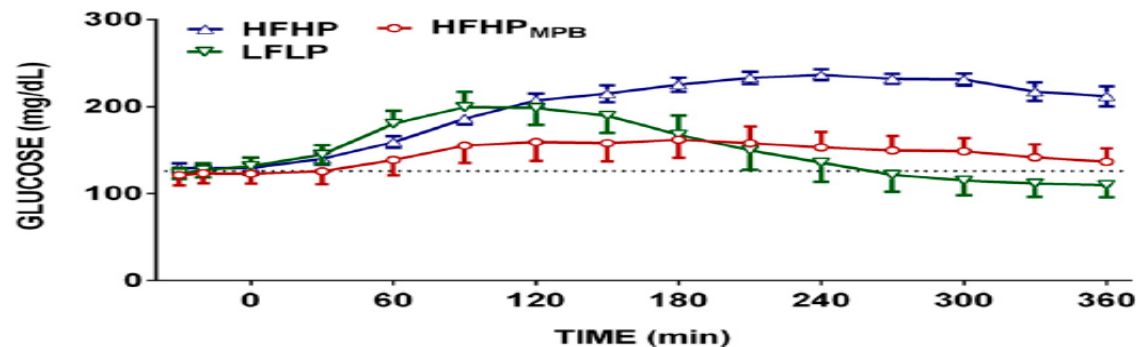


Figure 1—Postprandial plasma glucose response following LFLP and HFHP meals with identical carbohydrate content and insulin dose and an HFHP meal with optimal MPB (HFHP_{MPB}).

Diabetes Care 2016;39:1631–1634

How much extra insulin?

- 65% extra but varied from 17-124% extra
- Split bolus: 30% now, 70% over 150minutes



KISS

Keep it simple & safe

Endocrine Abstracts. 2018;58:P062.

Meal	Extra Insulin	Dual wave Split
English breakfast	25% Insulin x 1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes
Fish and Chips	25% Insulin x 1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes
Indian Takeaway	25% Insulin x 1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes
Pizza	25% Insulin x1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes
Chinese Takeaway	25% Insulin x 1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes
Pasta with creamy sauce e.g. macaroni cheese	25% Insulin x 1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes
Fast Food meals e.g. McDonalds, KFC	25% Insulin x 1.25	Pump: 50% now 50% over 2 hours MDI: 50% now, 50% in 60 minutes



Example

- Jim is having Pepperoni Pizza with garlic bread and chicken wings which is 80g carbohydrate
- Needs 25% extra insulin spread out by a dual wave or split dose.
- Calculations for an 80g carb meal wit ICR 1u:10g
 - $80 \div 10 \times = 8$ units
 - $8 \times 1.25 = 10$ units
 - Pump: 50% (5 units) now and 50% (5 units) over 2 hours
 - MDI: 50% (5 units) now and 50% (5 units) in 60 minutes time

Balance meals



Breakfasts

High carbohydrate

Cereal & semi-skim milk

Toast with Jam

Bagel with spread

Fruit bread

Fruit & low fat yoghurt

Balanced

Porridge, nuts & semi-skim milk

Toast with egg & mushroom

Toast with fish & spinach

Bagel with cream cheese & cress

Toast & peanut butter

Fruit & full fat yoghurt

Mushroom omelette & boiled potatoes

High fat with carbohydrate

English - Fry-up

Cheese omelette & fried potatoes



Lunches

High carbohydrate

Jacket potato & beans

Jam sandwich & biscuits

Sandwich, fruit & low fat yoghurt

Pot noodle & biscuits

Balanced

Jacket potato, cheese & salad

Sandwich, fruit & nuts

Sandwich, fruit & normal yoghurt

Pizza, salad, & fruit

Burger, salad & normal yoghurt

Pasta, meat, veg, & fruit

Rice, fish, veg & normal yoghurt

High fat with carbohydrate

Pizza, chips, & cookie

Burger, chips & crisps

Fast food takeaway



Evening meal

High carbohydrate

Waffles & beans

Pot noodle & bread

Mash potato & beans

Balanced

Meat, potatoes & vegetables

Fish potatoes & vegetables

Dahl, rice & salad

Sausage, mash potato & vegetables

Pasta, meat, vegetables & sauce

Omelette, salad & wedges

Pasta, beans & vegetables

High fat with carbohydrate

Creamy curry, Nann bread & rice

Battered fish & chips

Pizza, chips & garlic bread

Fast food takeaway

Cheesy pasta & garlic bread



Snacks

High carbohydrate

Cereal bars

Rice crackers

Toast & Jam

Fruit & low fat yoghurt

Dried fruit

Balanced

Nut based bar

Toast with peanut butter

Fruit & normal yoghurt

Dried fruit & nuts

Normal yoghurt

Cheese & crackers

High fat with carbohydrate

Crisps

Doughnuts

Large cookies



Mealtime Insulin Dosing for Type 1 Diabetes

Balanced meals

Insulin to carbohydrate ratio (ICR) covers the insulin requirement for meals containing balanced amounts carbohydrate, protein, and fat¹.

1. Count carbs (g) within 10g accuracy^{2,3} & use ICR
2. Normal bolus 20 minutes before eating¹⁴

Balanced meals

40-55% of total energy from carbohydrate, 20-40% from fat & 10-20% from protein^{22,23}.

Scrambled egg on toast: 20-30g carbs, 5-15g fat, 5-15g protein
Cheese sandwich & yogurt: 40-55g carbs, 10-25g fat, 10-25g protein
Chicken, mash potatoes & veg: 60-75g carbs, 15-35g fat, 15-35g protein

Different meals

High carb, low fat & protein

Carbs more than 55%, fat & protein less than 6g each¹
Fruit, cereal, biscuits & bars, toast & jam, rice crackers

1. Count carbs (g) & use ICR
2. Consider reducing insulin by 20%
3. Must be normal bolus 20 minutes before eating²⁴

High fat with at least 30g carbs

Fat more than 40g^{4,5,6,7,8}
Pizza, takeaways, creamy curry, Sunday roast & pudding, English breakfast

1. Count carbs (g) & use ICR
2. Increase insulin by 20-50%*
3. Pump: 50% before, 50% over 120 mins⁵, MDI: 50% before, 50% in 60 mins⁶
4. KISS method to adjust how much extra insulin & bolus split²¹

*may need to increase by 17-124%^{5,6,7,8}

Low carb

Carbs less than 15g
Meat & veg, eggs & mushrooms, cheese & salad

1. Count carbs (g) & use ICR
2. Count protein (g) ÷ 4 & use ICR*
3. Add calculated insulin from 1 & 2
4. Pump: Extended 1hr, MDI: Bolus after meal
*estimated^{9,10}

Stopping after meal glucose spikes

Nutrition tactics

[Low glycaemic Index](#)¹¹

Three balanced meals¹², normal bolus 20 minutes before¹⁴

Limit snacking and **do not** follow:
"Eat what you like when you like, just give insulin"¹³

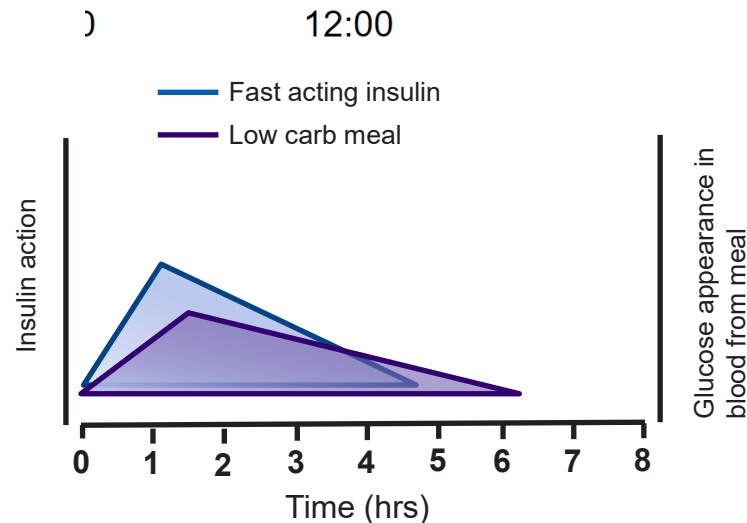
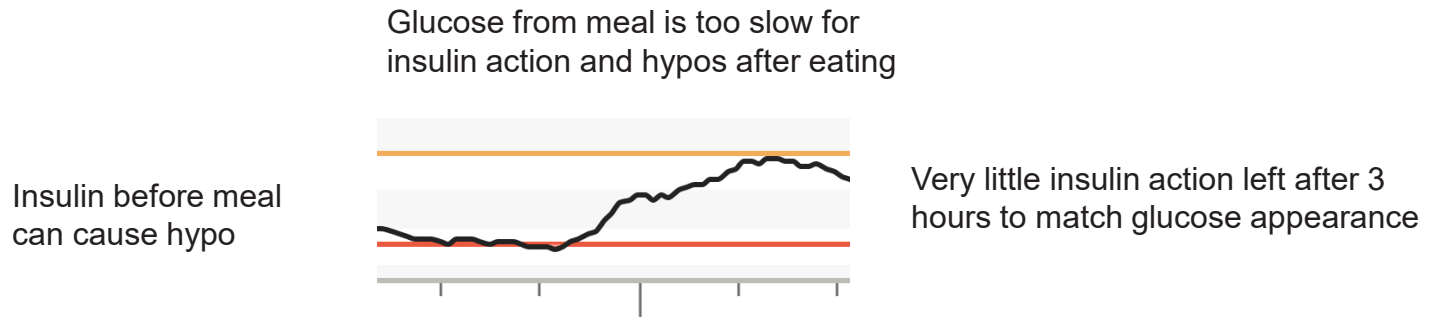
Insulin tactics

20 mins¹⁴ before or [DynamicGM](#)²⁰
Meal insulin into abdomen or upper arm¹⁵
[Super bolus if on a pump](#)¹⁶
Split large bolus insulin doses¹⁷

Activity tactics

60 mins moderate activity a day¹⁸
[10 mins moderate activity after main meals](#)¹⁹
[DynamicGM short-burst of exercise if spiking 1-2 hours after eating](#)²⁰

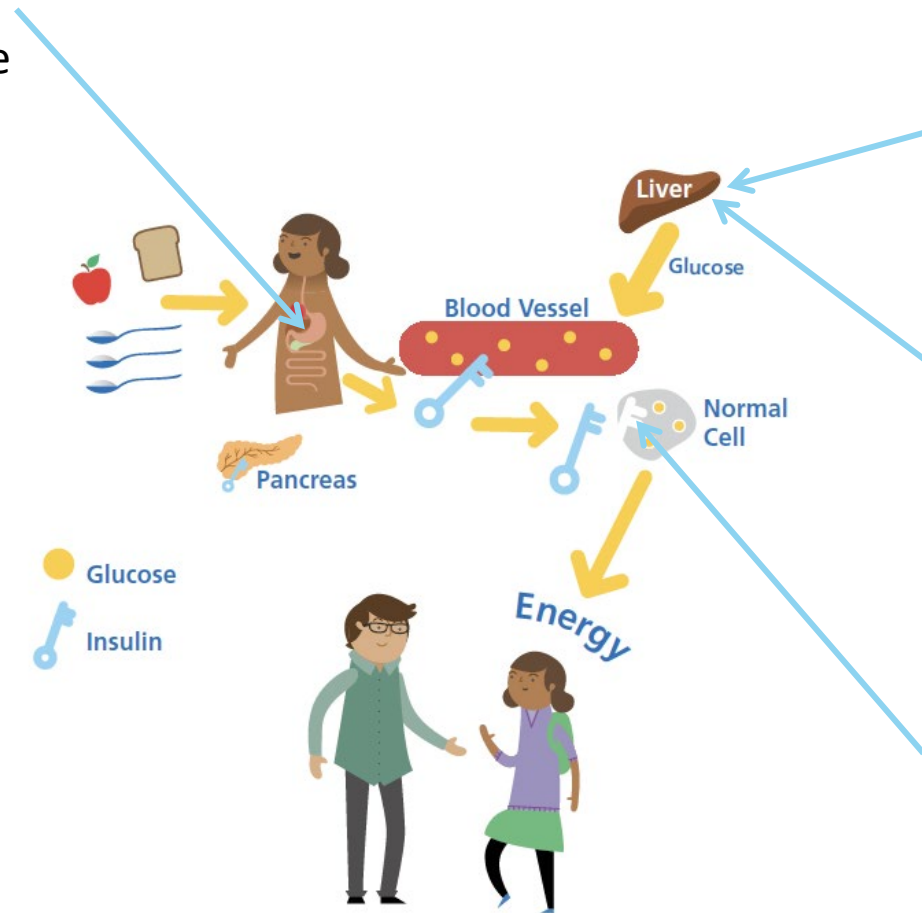
Fast acting Insulin vs glucose appearance in the blood from a low carb meal





Low carb meals

High fat meals slow down how quickly the stomach empties and therefore the glucose appearance in blood stream.



High protein increases Glucagon in the first 2 hours after eating pushing glucose out of the liver.

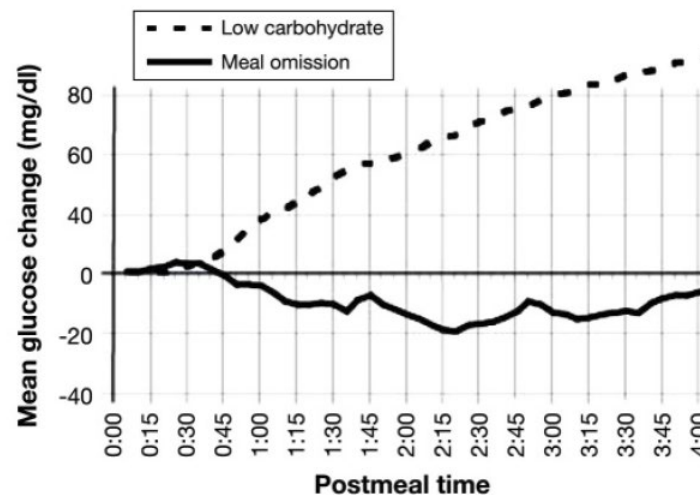
Excess protein increases new glucose made by the liver after 3 hours.

High level of fat in the blood stops the insulin working as effectively "Insulin resistance"

Require insulin to cover Low carb meals

Low carbohydrate meal

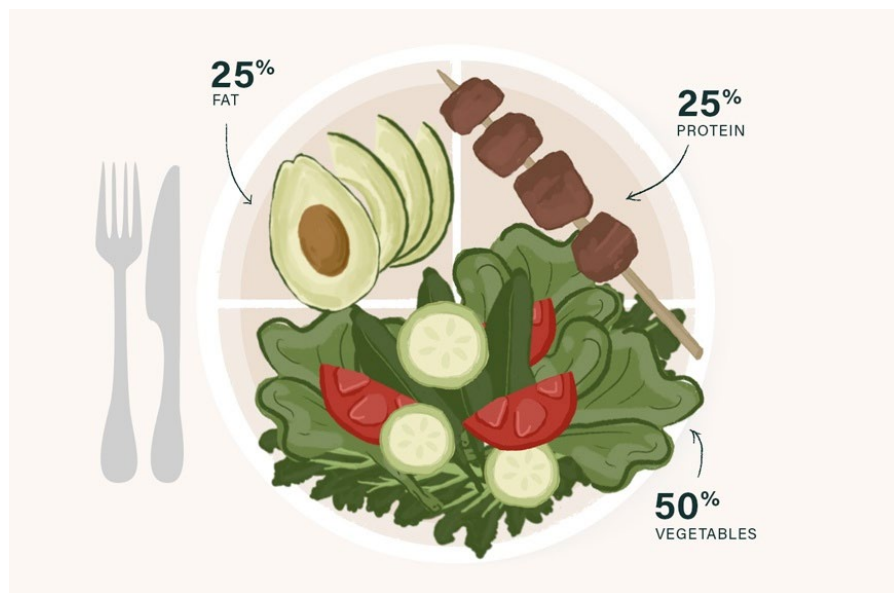
- 2.5g carb, 32.4g protein, 52.0g fat



Exp Clin Endocrinol Diabetes. 2010;118(5):325–7

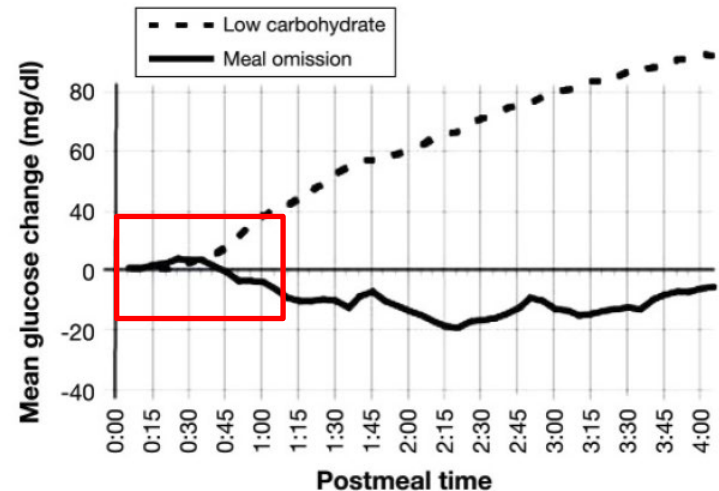


Small amount of insulin to cover Low carb meals



Low carb example

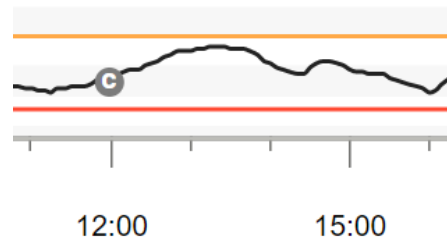
- Jim is eating a steak, green leafy vegetables, olive oil and hummus
 - 40g protein
 - 10g carbs
 - 30g fat
- Calculating insulin with an ICR if 1u:10g
 - Carbs $10\text{g} \div 10 = 1$ unit
 - Protein $40\text{g} \div 4 = 10 \div 10 = 1$ units
 - Carbs insulin 1unit + protein insulin 1units = 2 units
 - How to deliver:
 - Pump: Extended wave over 1 hour
 - MDI: After eating
- Adjust timing and amount based on experience



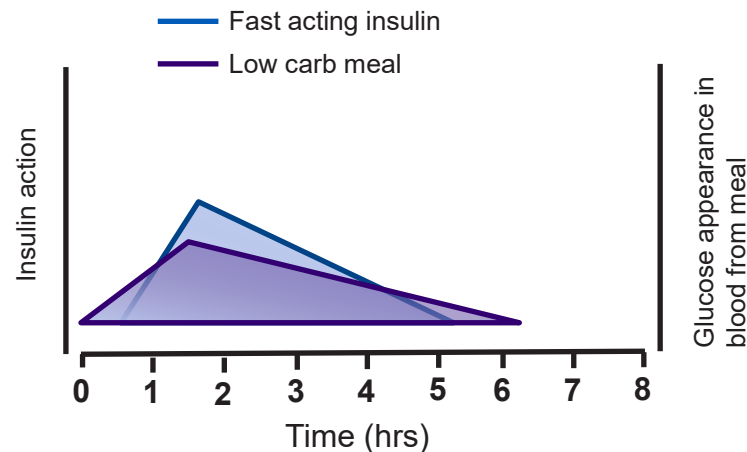
Fast acting Insulin vs glucose appearance in the blood from a low carb meal

Glucose from meal better matched
insulin action

Insulin after meal
prevents going hypo



More insulin 3-5 hours after eating to
match glucose appearance from low
carb meal



Stopping after meal glucose spikes

Nutrition tactics

Three balanced whole food meals with minimal snacks

Do not follow:

"Eat what you like, when you like, just give insulin"

Low glycaemic index carb choices

Insulin tactics

Insulin 20 mins before meal

Meal insulin into abdomen or upper arm not leg or buttocks

Avoid lumpy injection sites and rotate injection/cannula sites

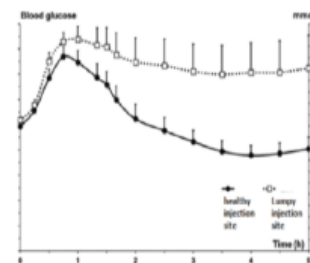
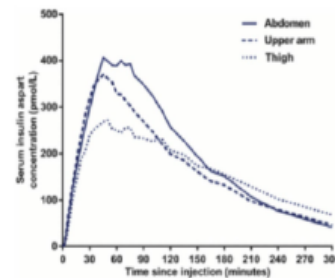
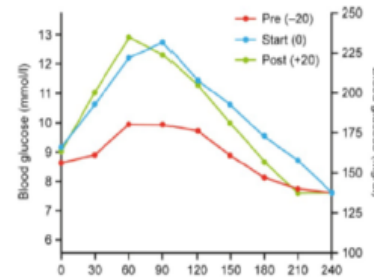
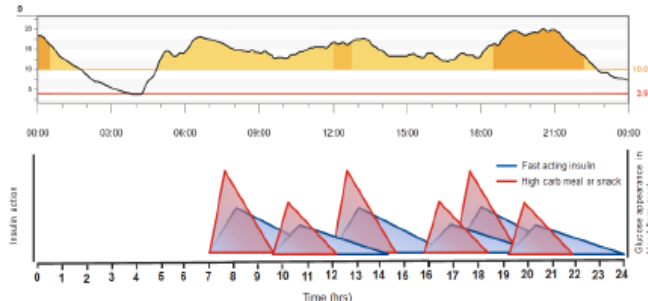
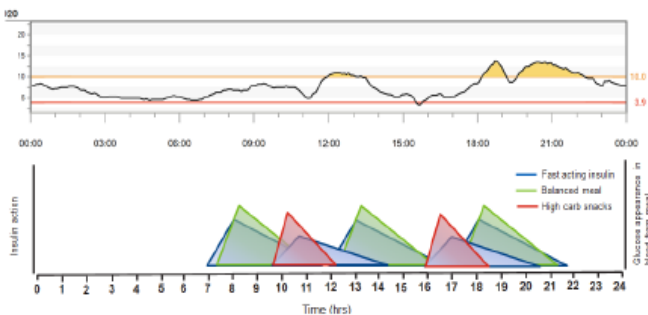
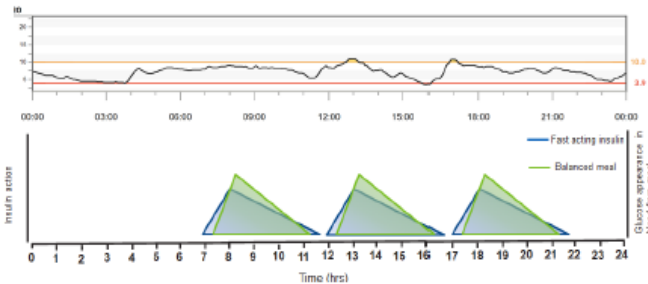
Activity tactics

60 mins moderate activity a day, try three 20 minutes:

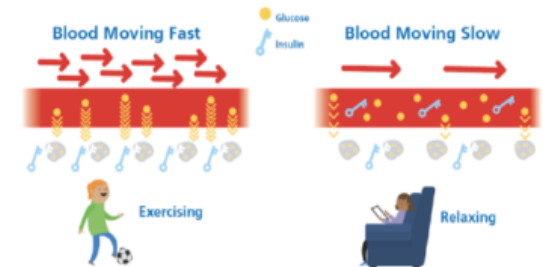
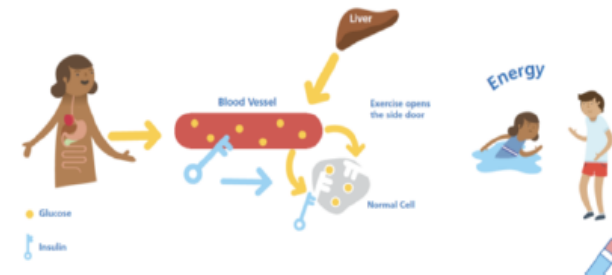
"Opens a side door to muscle cells to let more glucose in"

10 mins of moderate activity after meals:

"Gets insulin to the muscles faster to speed up its action"



Low to moderate intensity activity:
walking, playing in the playground, jogging, shopping



Keep it simple, do 10 minutes of moderate activity after each meal to stop glucose spikes!

Walking the talk

AGP

14 Days Sun 18 Oct 2020 - Sat 31 Oct 2020



Dexcom

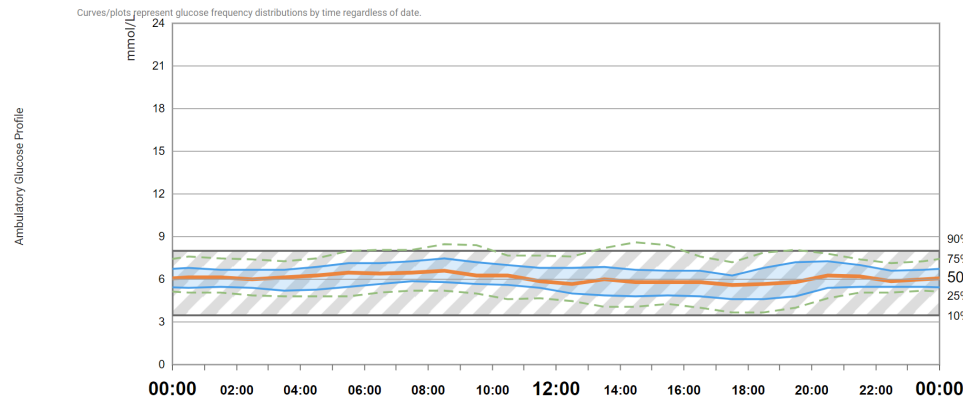
captur**AGP**

John

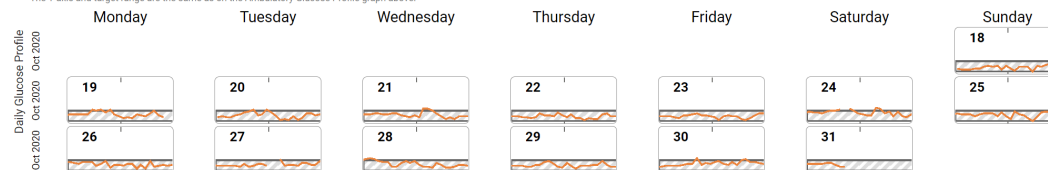
Sun 18 Oct 2020 - Sat 31 Oct 2020 (13.4 days)

Glucose Statistics	Avg Glucose mmol/L	Estimated HbA1c									
	6.1	5.5%	Very Low	Low	In Target Range	High	Very High	Coefficient of Variation	SD mmol/L	% Time CGM Active	
	Glucose Exposure		< 3.0 mmol/L 0.3%	< 3.5 mmol/L 0.9%	3.5 - 8.0 mmol/L 92.1%	> 8.0 mmol/L 7.0%	> 13.9 mmol/L 0.0%	19.9%	1.2	97.0%	

CGM 50% - Median 25/75% - IQR 10/90% Target Range



The Y axis and target range are the same as on the Ambulatory Glucose Profile graph above.



Will you adopt any of?

- Normal is not natural (proven over millions of years of evolution)?
 - *Would my great grandmother recognise it as food?*
- Do I have skin in the game - Monkey (Grace & Jude) see monkey do
 - *Am I walking the talk?*
- Does my food environment betray my intentions?
 - **Are my cupboards, fridge and lunchbox filled with normal or natural food?**



Mealtime Insulin Dosing for Type 1 Diabetes

John Pemberton

Diabetes Dietitian

Type 1 D since 2008

johnpemberton@nhs.net

(I may not reply as my kids come first, but I will if I can)

