

## Insulin Myths and Facts

If you have type 2 diabetes and your A1C is slowly creeping up despite your best efforts, insulin may be the next step in treating your diabetes. Many people struggle with the thought of insulin because of what they have heard about it. Some common myths about insulin and facts that may help you overcome your fears are listed below.

**Myth: Insulin means I am a failure.**

**Fact:** Needing insulin does not mean that you have failed to manage your diabetes well. Because type 2 diabetes is a progressive disease, eventually your pancreas is just not able to keep up with your body's need for insulin—no matter what you've done to manage your diabetes. When other medicines no longer keep your blood glucose on target, insulin is often the next logical step for treating diabetes.

**Myth: Insulin does not work.**

**Fact:** Although many people think of diabetes as a “sugar” problem, actually diabetes is an insulin problem. The insulins used today are very similar to the insulin that the body natural-

ly makes. In fact, insulin is the best way to lower your blood glucose.

**Myth: Insulin causes complications or death.**

**Fact:** The belief that insulin causes complications or death often comes from seeing what happened in the past to family members or friends with diabetes. Although it can be hard to get past your fear, in fact, it is more likely that insulin might have delayed or even prevented these complications if it had been started earlier.

**Myth: Insulin causes weight gain.**

**Fact:** It is true that many patients who begin insulin gain weight. Insulin helps your body use food more efficiently. If this is a concern, ask for a referral to a dietitian before you start insulin.

**Myth: Insulin injections are painful.**

**Fact:** Although no one likes shots, most people are surprised by how little an insulin injection hurts. Insulin does not “sting” going in, and the needles are

very small and thin. Most people find that it is less painful than a finger stick to monitor their blood glucose level.

**Myth: Insulin causes hypoglycemia.**

**Fact:** It is true that insulin can cause a low blood glucose reaction. However, with the newer or long-acting insulins, hypoglycemia is less likely to occur. And it is rare for people with type 2 diabetes to pass out from low blood glucose. You can learn how to prevent, recognize, and treat hypoglycemia and thus avoid severe insulin reactions.

**Myth: Insulin is addictive.**

**Fact:** You cannot get addicted to insulin. Insulin is a natural substance your body needs. If you are concerned that people who may see you give your insulin shot in a public place will think you are using illegal drugs, ask your provider if an insulin pen would work for you.

**Myth: Insulin is too expensive.**

**Fact:** Diabetes is expensive, no question about it. Generally, however, insulin is usually less

expensive than using several different types of oral medications. Because prices can vary a great deal at different stores, shop around for the best prices on insulin and other supplies.

**Myth: Insulin means that my life will change.**

**Fact:** Many people believe that once they start insulin, they can no longer be independent, live alone, travel, or eat away from home. None of these is true. With planning, there is no reason why you cannot do everything you did before. Ask your provider for a referral to a diabetes educator who can help you fit insulin into your life.

Actually, many people find that their lives do change with insulin—for the better. They have more energy, have more flexibility in their schedule, and feel more positive about themselves. After starting insulin, many people wonder why they waited so long to feel better.

**Questions to Ask Yourself and Discuss With Your Provider**

If you are considering insulin or your provider has suggested it to you, the following questions can help you get ready for your next visit.

- How satisfied are you with your current treatment?
- How satisfied are you with

your current level of blood glucose control?

- How interested are you in making a change in therapy?
- What do you need to know to consider insulin?
- What is your biggest fear?
- What problems do you think you will face?
- What supports do you have to help you overcome your fears and problems?
- How confident are you that you can manage insulin?
- What do you see as the most positive thing about insulin therapy for you?
- Are you willing to try insulin? If not, what would cause you to try insulin?

