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Insulin injection errors raise diabetes risk, warn experts

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Lucknow: Years of insulin use do not necessarily ensure correct injection practices, and common mistakes can make blood sugar levels harder to control, experts said at the conclave of medical emergencies and trauma (COMET) 2026 on Friday.

Prof Mushtasin Malik of Society of Acute Care, Trauma and Emergency Medicine (SACTEM) said many insulin users continue to inject repeatedly at the same site, fail to rotate injection sites, reuse needles and inject into areas with lumps or hardened skin.

Malik, who was training nursing personnel at Atal Bihari Vajpayee Medical University (ABVMU) on handling emergency cases, was part of the first day of COMET 2026, which focused on hands-on workshops in point-of-care ultrasound, neurological emergencies, mechanical ventilation (VENT PRO), nursing-focused ventilation and resuscitation for nursing and allied health staff.

Citing a study of insulin users, Malik said partici-

RIGHT WAY TO TAKE INSULIN

- Take prescribed dose at prescribed time
- Inject into recommended subcutaneous site
- Rotate injection sites regularly
- Use correct needle and injection technique
- Keep needle in place for recommended time
- Prepare insulin as directed before use

PRECAUTIONS

- Avoid injecting repeatedly at same spot
- Do not inject into lumps or hardened skin
- Never reuse needles
- Do not use insulin with clumps or unusual appearance
- Do not change doses without medical advice

pants had lived with diabetes for an average of 12 years. However, 35% were not following the correct injection technique, while only 37% could correctly identify suitable injection sites.

Dr Lokendra Gupta, founder of SACTEM, stressed the need for long-term insulin users to review their injection practices regularly. "Repeated injections at the same site can cause lipohypertrophy, a condition in which fatty tissue beneath the skin becomes thickened or lumpy," he said.

An Indian study involving 1,011 insulin users found that more than one in four participants reported signs

of lipohypertrophy, while nurses identified the condition in about one in five participants during examination.

According to Malik, lipohypertrophy is associated with mistakes such as injecting at the wrong angle, inadequate rotation of injection sites and needle reuse.

Dr Lokendra said insulin injected into thickened or lumpy tissue may not be absorbed properly, making blood sugar control more difficult. Patients who switch from affected areas to normal tissue should not alter their insulin dose without consulting a doctor, he added.