# Basaglar

## (insulin glargine [recombinant])


New Product Slideshow

MPR

# Introduction

- **Brand name:** Basaglar
- **Generic name:** Insulin glargine (recombinant)
- **Pharmacological class:** Insulin
- **Strength and Formulation:** 100 Units/mL; contains m-cresol
- **Manufacturer:** Boehringer Ingelheim and Lilly
- **How supplied:** KwikPen prefilled pen (3mL)—5
- **Legal Classification:** Rx

# BASAGLAR

# Indications

- Type 1 diabetes (in adults and children) and type 2 diabetes (in adults)
- **Limitations of use:** not for treating diabetic ketoacidosis

# Dosage & Administration

- Give by SC inj once daily at same time each day into abdominal area, thigh, or deltoid; rotate inj sites
- No pronounced peak, duration 24 hours or longer
- ≥6yrs: individualize; monitor and adjust as needed
- **Type 1 diabetes:** initially ⅓ of total daily insulin dose; give remainder of the total dose as short- or rapid-acting, premeal insulin

# Dosage & Administration

- **Type 2 diabetes:** Initially 0.2 Units/kg or up to 10 Units once daily
- May need to adjust amount, timing of short- or rapid-acting insulins and doses of any antidiabetics
- **Switching from another insulin glargine 100 Units/mL product:** initial Basaglar dose should be the same as previous insulin glargine 100 Units/mL dose
- **Switching from once-daily insulin glargine 300 Units/mL:** initially 80% of the previous insulin glargine 300 Units/mL dose

# Dosage & Administration

- **Switching from an intermediate- or long-acting insulin regimen (other than insulin glargine 100 Units/mL):** may need to change basal insulin dose; and adjust the amount, timing of the short-acting insulins and doses of any antidiabetics
- **Switching from twice-daily NPH:** initially 80% of the previous total NPH dose

# Considerations for Special Populations

- **Pregnancy:** Category C
- **Nursing mothers:** May need to adjust dose
- **Pediatric:** <6yrs: not established
- **Geriatric:** No overall differences observed
- **Renal or hepatic impairment:** Frequent monitoring and dose adjustment may be necessary

# Warnings/Precautions

- Instruct patients on proper administration of insulin, type of insulin, and management of hypoglycemia
- **Do not** reuse or share pens, needles, or syringes between patients
- Increased risk of **hyperglycemia** or **hypoglycemia** if changes in physical activity, meal patterns, renal or hepatic function, insulin regimen and if acute illness occurs: monitor glucose more frequently and may need to adjust dose

# Warnings/Precautions

- **Monitor** potassium levels in patients at risk for hypokalemia (eg, concomitant $K^+$-lowering or $K^+$-sensitive drugs)
- **Discontinue** if hypersensitivity reactions occur

# Interactions

- **Do not** mix or dilute with other insulins
- **Potentiated by** oral antidiabetic agents, ACE inhibitors, ARBs, disopyramide, fibrates, fluoxetine, MAOIs, pentoxifylline, pramlintide, propoxyphene, salicylates, somatostatin analogs, sulfonamide antibiotics
- **Antagonized by** corticosteroids, isoniazid, niacin, danazol, diuretics, phenothiazines, sympathomimetics, somatropin, thyroid hormones, estrogens, glucagon, oral contraceptives, progestogens, atypical antipsychotics, protease inhibitors

# Interactions

- Concomitant **thiazolidinediones** (TZDs) may cause fluid retention and heart failure; consider dose reduction or discontinue TZDs
- Variable effects with β-blockers, clonidine, lithium salts, alcohol, pentamidine
- Concomitant β-blockers, clonidine, guanethidine, reserpine may mask signs of hypoglycemia

# Adverse Reactions

- Hypoglycemia
- Allergic reactions
- Injection site reactions
- Lipodystrophy
- Pruritus
- Rash
- Edema
- Weight gain
- Hypokalemia

# Mechanism of Action

- Insulin and its analog lower blood glucose by stimulating peripheral glucose uptake, especially by skeletal muscle and fat, and by inhibiting hepatic glucose production

- It inhibits lipolysis and proteolysis, and enhances protein synthesis

# Clinical Trials

- The safety and efficacy of another insulin glargine product, 100 Units/mL, given once-daily at bedtime was compared to that of once-daily and twice-daily NPH insulin in open-label, randomized, active-controlled, parallel studies of adults and pediatric patients with type 1 diabetes mellitus, and adults with type 2 diabetes mellitus
- In general, the reduction in HbA1c with this other insulin glargine product was similar to that with NPH insulin
- For more clinical trial data, see full labeling

# New Product Monograph

- For more information view the complete product monograph available at:

  http://www.empr.com/basaglar/drugproduct/407/