

ONETOUCH[®]
Blood Glucose Monitors



simple start[™]

A guidebook for people with diabetes

This booklet is designed to supplement, not replace, your doctor's advice. Please consult your doctor if you have any questions about what you read.



You'll learn how the body works when you have diabetes, what happens when you inject insulin, the factors that affect your blood glucose, how to use self-monitoring to stay in the Diabetes Safe Zone*, how to partner with your doctor and much more.

*** Diabetes Safe Zone refers to blood glucose levels considered safe by your doctor.**

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Protect yourself from the Diabetes Danger Zone*

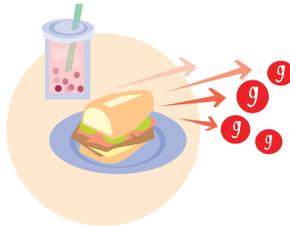
When you have diabetes, your body's ability to keep your blood glucose in a normal range is no longer on "automatic." It may need some help. That's why your doctor has prescribed insulin. But you still have to do your part to make sure you keep your blood glucose out of the Diabetes Danger Zone*.



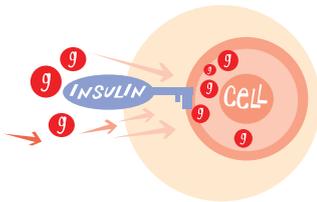
* When blood glucose levels are too high or too low, you're in the Diabetes Danger Zone. Your doctor will identify the glucose levels that define your Diabetes Safe Zone to help you stay healthy.

Understand the need for insulin

Starting insulin doesn't mean you've done something wrong or that you haven't been doing a good job managing your diabetes. Let's look at what happens in the body before and after diabetes.



Much of the food you eat is converted to blood glucose.

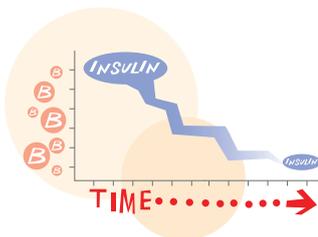


Blood glucose enters the cells for energy. Insulin is the key that lets glucose into the cells.

Replacing the insulin your body needs

By adding insulin to your treatment your doctor is taking a normal next step to help you stay out of the Diabetes Danger Zone*. If you have any questions about your insulin therapy or if you're uncomfortable injecting insulin, talk to your doctor.

What happens when you have type 2 diabetes?



Over time, beta cells start losing the ability to produce enough insulin.



Doctors prescribe insulin injections to make up for the difference.

The right insulin dosage brings your blood glucose back in control.



* **When blood glucose levels are too high or too low, you're in the Diabetes Danger Zone. Your doctor will identify the glucose levels that define your Diabetes Safe Zone to help you stay healthy.**

Learn about insulin types and how they work

Some types of insulin act quickly to match the rise in blood glucose after a meal. Other types act more slowly to control blood glucose throughout the night and day. Your doctor will prescribe the insulin that's best for you.

See how different types of insulin work and the best times to self-monitor. The timing of insulin varies from person to person and can even vary in the same person on different days.

	Insulin type	When it starts working
BASAL	Long acting Usually taken at bedtime to control glucose while you sleep.	3 - 4 hours
	Intermediate acting Usually taken in the morning to work all day.	1 - 3 hours
BOLUS	Short acting Sometimes used around mealtimes, it is taken 30-40 min before eating. Therefore timing of meals is important.	30 - 60 minutes
	Rapid acting Injected right before meals. By the time food is digested and glucose reaches the bloodstream, rapid-acting insulin works hard to move the glucose into the cells.	10 - 15 minutes



Ask your doctor for specific action times of your insulin.

When to self-monitor

- Before injecting, to see if your glucose is in the Diabetes Safe Zone
- Before breakfast, to see if your insulin dose works to keep you in the Diabetes Safe Zone throughout the night
- At night, if your fasting results are high or low

- Before injecting, to see if your glucose is in the Diabetes Safe Zone
- Before and 2 hours after meals, to see if your insulin dose works to keep you in the Diabetes Safe Zone throughout the night
- Before bed, to see if you need a snack so your glucose doesn't fall too low during the night

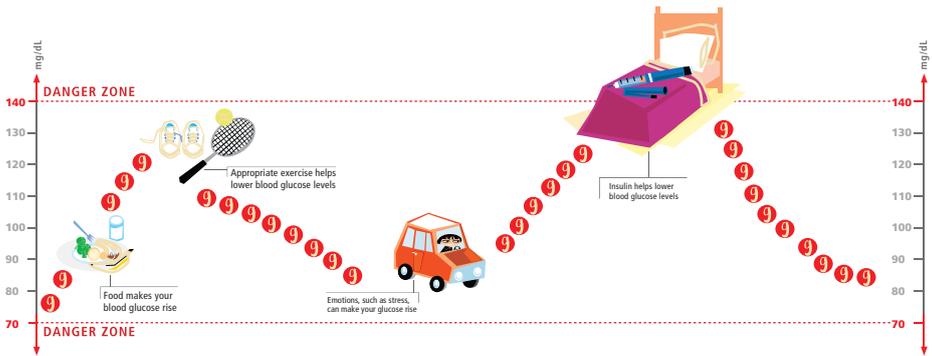
- Before injecting, to see if your glucose is in the Diabetes Safe Zone and to help you plan your meal content and insulin dosage
- 2 hours after meals, to check the effect of your insulin dose
- Before bed, to see if you need a snack so your glucose doesn't fall too low during the night

- Before injecting, to help determine your insulin dose and to help you plan your meal content
- 2 hours after eating, to check the effect of your insulin dose
- Before bed, to see if you need a snack so your glucose doesn't fall too low during the night

Adapted from: Canadian Diabetes Association. 2003 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada. Can J Diabetes. 2003;27(Suppl 2):S32.

Know why blood glucose levels change

Blood glucose is affected by food, exercise, emotions and insulin. However, you can't necessarily feel the changes. Self-monitoring is the only way to know for sure.



Self-monitoring of blood glucose (SMBG)

Self-monitoring tells you and your doctor how well your insulin treatment is working day to day.



Self-monitoring helps you detect low and high blood glucose.



Self-monitoring provides feedback about your food choices.

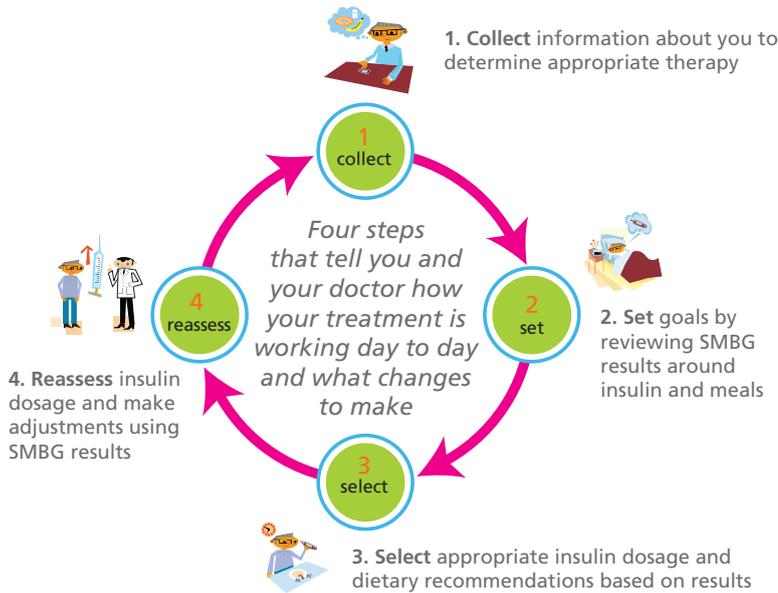


Self-monitoring helps you manage your blood glucose when you're ill or under stress.

Work with your doctor

Your doctor added insulin to your treatment because you need more help to keep your blood glucose out of the Diabetes Danger Zone*. Insulin therapy can be extremely effective and help you reach your glycemic goals quickly and safely.

Insulin affects people differently, so your doctor must determine the dosage that's right for you and make adjustments, as needed, over time. The self-monitoring (SMBG) results you bring to each appointment play a vital role in this process.



Why it's important to self-monitor regularly

Your body and your insulin needs will naturally change over time. Your doctor may also adjust your blood glucose goals. Even when you reach your goals, keep self-monitoring to watch for changes in your blood glucose control. It will help you stay out of the Diabetes Danger Zone*.

* **When blood glucose levels are too high or too low, you're in the Diabetes Danger Zone. Your doctor will identify the glucose levels that define your Diabetes Safe Zone to help you stay healthy.**

Managing low blood glucose

Taking insulin sometimes puts you at risk for hypoglycemia.

Hypoglycemia is low blood glucose. The American Diabetes Association defines hypoglycemia as blood glucose levels under 70 mg/dL. If left untreated, hypoglycemia can result in unconsciousness or even a coma. But don't worry, just be extra careful and stay prepared.



Be prepared-Avoid hypoglycemia

- Self-monitor. It's the only way to know for certain if your glucose is too low.
- Self-monitor before you inject insulin. Insulin lowers your blood glucose level and you want to make sure your glucose doesn't fall too low overnight.
- Learn to recognize the signs and symptoms. Common symptoms include feeling shaky, sweaty or dizzy; clumsiness; confusion; changes in mood.
- Know how to bring your glucose back into the Diabetes Safe Zone.

If you are hypoglycemic, follow your doctor's instructions. Record the event on a log sheet with the time, self-monitoring result and what you think caused it. Share these details with your doctor.



If your result is low, the 15 x 15 method can help.

1. Eat 15 grams of sugar.
2. Self-monitor 15 minutes later.

If your result is still low, repeat steps 1 and 2.

Managing high blood glucose

If you're on insulin, it's also important to watch out for high blood glucose (also known as hyperglycemia), which increases your risk of complications, such as a heart attack.

Self-monitoring (SMBG) is often the only sure way to detect hyperglycemia.

Learn to solve high glucose results when you're on insulin

Let's look at situations that may cause high blood glucose.



High fasting results

Missed your evening dose of insulin

Plan: Keep your insulin kit by your bedside and post reminder notes



Using a new insulin or new dosage or your insulin dose needs to be adjusted

Plan: Self-monitor before injecting. Follow up the next morning with a fasting SMBG



Dawn phenomenon or rebound hyperglycemia

Sometimes the liver releases too much glucose in the early morning hours when your blood glucose is at its lowest or when low blood glucose occurs in the middle of the night. Your doctor may need to adjust your insulin dose.

Plan: If you wake up in the middle of the night, sweating, perform a test to help your doctor determine if you need an insulin adjustment

Keep a record of your SMBG results to share with your doctor.

Getting feedback about your food choices

Of all things that affect your blood glucose, food has a significant effect. Even if you take insulin and other diabetes medications, what you eat and how much you eat is very important, especially when it comes to carbohydrates. Let's look at how SMBG can help you make the right food choices.



Try self-monitoring around a meal.

Self-monitor before and 2 hours after beginning a meal.



Compare your results.



If the difference between two hours after meal and before meal result is $>50\text{mg/dL}$, eat smaller portion of carbohydrates.

Doctor may adjust therapy to include rapid-acting insulin before meals.



Losing weight can give you lower blood glucose and more energy

Managing your blood glucose when you're ill or under stress

Illness, injury, surgery, dental work or emotional trauma can cause high blood glucose. Emotions such as excitement, anger and fear can cause high and low blood glucose, depending on the individual.

Self-monitoring (SMBG) can help you manage these situations.

SMBG helps your doctor see the effect of illness or emotional stress on your diabetes and make any necessary changes to your diabetes management plan.

When you're faced with these situations, be sure to self-monitor frequently (every 3 to 4 hours), drink plenty of water and follow your doctor's advice.

1. Self-monitor frequently



2. Drink plenty of water



3. Follow your doctor's instructions



Find the blood glucose monitor that's right for you

Now that you're taking insulin, it's critical that you and your doctor make therapy decisions based on your day-to-day blood glucose measurements. Let's take a look at how different meters can help you reach your blood glucose goals quickly and safely.

A blood glucose monitor that's easy to use will help you avoid making errors so you can reach your insulin treatment goals quickly and easily.



All One Touch® blood glucose monitors make self-monitoring easy with three simple steps.

- 1. Insert test strip**
- 2. Apply sample to strip**
- 3. Get accurate# results in just 5 seconds**

Be sure that the code on the test strip vial matches the code shown on the blood glucose monitor.



LifeScan, Inc.: Clinical Accuracy and User Acceptance of the OneTouch® Ultra® Blood Glucose Monitoring System. Milpitas (CA); 12/2000. AW 057-426A. Meets ISO Minimum Acceptable Accuracy Criteria (MAAC) Standards. International Organization for Standardization. In Vitro Diagnostic Test System – Requirements for Blood-Glucose Monitoring System for Self-Testing in Managing Diabetes Mellitus ISO 15197:2003(e).

New One Touch SelectSimple® - Simplicity that Matters

OneTouch SelectSimple® is designed for simplicity. It has unique colour and audio alerts for high and low blood sugar levels.

- No setup
- No coding
- High-low alerts[†]



- S** etup-free, no more coding
- I** nterprets blood glucose highs and lows quickly with 2 alerts
- M** eets ISO accuracy requirements[†]
- P** riced economically
- L** ightweight and small with no buttons
- E** asy to use

[†] The ranges for high/low alerts are preset in the monitor according to post prandial blood glucose levels recommended by the American Diabetes Association guidelines 2011. The reading and the musical alerts should be interpreted in light of the same. The preset ranges of blood glucose levels are as follows: greater than or equal to 240mg/dL is considered Very High, greater than or equal to 180mg/dL is considered High, less than or equal to 70mg/dL is considered Low. Talk to your doctor and seek advice on how the monitors preset ranges may be relevant to your personal targets.

[†] International Organization for Standardization. In vitro diagnostic test system - Requirements for blood-glucose monitoring systems for self-testing in managing diabetes mellitus. ISO 15197:2003(e)

OneTouch UltraEasy® - Advance Monitor for Enhanced Information

More information about your blood glucose control helps. OneTouch UltraEasy® makes it easy because it keeps track of your self-monitoring results.



ACCURATE RESULTS IN JUST **5** SECONDS

SINGLE CODING

STORES **500** READINGS

LIFE TIME WARRANTY™

LifeScan, Inc.: Clinical Accuracy and User Acceptance of the OneTouch® Ultra® Blood Glucose Monitoring System. Milpitas (CA); 12/2000. AW 057-426A. Meets ISO Minimum Acceptable Accuracy Criteria (MAAC) Standards. International Organization for Standardization. In Vitro Diagnostic Test System – Requirements for Blood-Glucose Monitoring System for Self-Testing in Managing Diabetes Mellitus ISO 15197:2003(e).

** To Know More Contact OneTouch® Customer Service at 1800 225544 (toll free) or 022-66143600



We hope the information in this booklet has helped you feel more in control of your insulin therapy and your diabetes.



ONETOUCH
SelectSimple[®]



ONETOUCH
UltraEasy[®]

For more information on how easy it is to self-test with OneTouch[®] Blood Glucose Monitors, ask your doctor or call Customer Service Center at 1-800-22-5544 (Toll-Free) / 022-30845544 (call charges, as applicable) from 7am to 11pm all days or visit www.OneTouch.in

Note: All blood glucose goals and guidelines in this booklet are defined by the American Association of Clinical Endocrinologists, "Medical Guidelines for Clinical Practice for the Management of Diabetes Mellitus," 2007. LFS00X/2007

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