

**Description of practices related to insulin injection therapy and sharp disposal among patients attending the diabetic clinic, Colombo North Teaching Hospital, Sri Lanka**

Kushani Atukorala<sup>1,2</sup>, Deepama Sumanasekera<sup>3</sup>,  
Kumudu Wickramasinghe<sup>3</sup> & Sumudu Wickramasinghe<sup>4</sup>

<sup>1</sup>Department of Physiology, Faculty of Medicine, University of Sri Jayawardenapura, Gangodawila, Sri Lanka, <sup>2</sup>Department of Family Medicine, University of Kelaniya, Kelaniya, Sri Lanka, <sup>3</sup>National Eye Hospital, Colombo, Sri Lanka, <sup>4</sup>MOH Office, Boralessgamuwa, Boralasgamuwa, Sri Lanka.

**Introduction**

Diabetic patients on insulin therapy are compelled to use sharps such as insulin needles and lancets on a regular basis. As a result thousands of used sharps and bloodstained materials are generated daily by them. While there is a huge concern over sharps disposal practices in healthcare settings, the sharps disposal practices of diabetic patients living at home has been poorly documented.

## Methodology

Randomly selected sample of 158 diabetic patients were obtained from the diabetic clinic, Colombo North Teaching Hospital. Data collected using an interviewer administered questionnaire and clinic records.

## Results

Sample population was aged between 21 and 90. Mean age 60. Majority had used insulin for more than 1 year 131/158 (83%). Very few 5/158 (3%) used the insulin pen while majority used syringes to inject insulin. Only 10 (6%) regularly checked blood sugar using needles/lancets. Majority 132/158 (84%) injected insulin more than twice per day and  $\geq 50\%$  used the same needle more than six times, for more than 3 days. Majority 150/153 (98%) of the syringe users recapped the needle. A significant number 73/158 (46%) also involved others when injecting and disposing needles. Used needles/pens were disposed in to a common household garbage bin, sharps container, toilet pit, garbage dump and indiscriminately by 66 (42%), 9 (6%), 8 (5%), 14 (8%), 11 (7%), respectively. Some 15/158 (9.5%) have collected sharps since beginning without disposing. Many respondents had received no information on how to dispose of their sharps. Those who recalled receiving information were more likely to dispose of their sharps safely.

## Conclusions

Insulin-dependent diabetic patients are not educated on safe sharps disposal methods, leading to unsafe disposal of needles. Appropriate education on the correct disposal of sharps should be an integral part of their diabetic counselling.

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