

**Insulin suspension isophane****S****Oedema: case report**

A 14-year-old girl with type 1 diabetes mellitus developed oedema while receiving insulin suspension isophane [NPH insulin].

The girl was admitted with a 3-week history of bilateral oedema of the legs. She had not achieved good glycaemic control when receiving insulin suspension isophane 1 U/kg/day [route not stated], and the dosage had been increased to 1.5 U/kg/day 1 month prior to admission. On examination, her weight was 53kg, compared with 49kg prior to developing oedema. Severe oedema was evident in her legs, extending to her abdomen. Urinalysis was positive for glucose and ketones, and negative for protein. Her random blood glucose was 350 mg/dL. Her HbA1C was 16.5%, indicating uncontrolled diabetes. Further investigations, including renal function tests, were normal, and she was not receiving any other medications.

The girl's insulin oedema spontaneously resolved 4 weeks after glycaemic control was attained.

**Author comment:** *"Peripheral oedema can be associated with chronic insulin over-treatment in young diabetic patients".*

Rostami P, et al. Insulin edema in a child with diabetes mellitus type 1. Turkish Journal of Pediatrics 54: 309-311, No. 3, Jun 2012 - Iran 803082655