Supplementary

Insulin adjustment

Initial dose of insulin is Abasaglar ® 0.2 IU/kg/day with injection in the thigh before bedtime. Patients are instructed in blood glucose measurements and educated in treating hypoglycaemic event. Blood glucose is measured daily before breakfast. The study nurse contact the patient the day after first injection and every 3.-7, day hereafter in order to adjust insulin dose. Goal is a fasting plasma glucose <7.0 mmol/l. When total insulin dose exceeds 30-40 units, insulin is injected twice daily.

If one blood glucose measurement is \leq 4.0 mmol/l the patient shall contact the study nurse in order to adjust insulin dose. A severe hypoglycaemic event (needing help from third part or blood glucose measurement is \leq 3.0 mmol/l) should always result in immediate contact in order to adjust insulin dose.

> 12.1 mmol/l	10.1-12 mmol/l	8.1-10 mmol/l
+8 IE	+6 IE	+4 IE
7-8 mmol/l	4—6.9mmol/l	< 4.1 mmol/l
+1-2 IE	unchanged	-2 IE

Table 1 shows recommended adjustments of insulin, Abasaglar ®, dose according to pre-prandial blood glucose measurements.

If HbA1c is above target while fasting blood glucose is < 7.0 mmol/l, then meal insulin is considered. Fast acting insulin, NovoRapid®, is initiated before the principal (largest) meal at 4 to 6 units/injection. Blood glucose is measured daily two hours after meals. The dose of NovoRapid® before the previous meal is regulated every third day according to the following:

If one plasma glucose measure is \leq 4.0 mmol/L the participant shall contact the study nurse or investigator in order to adjust insulin dose. Goal is a plasma glucose two hours after meals < 10.0 mmol/L.

> 12.1 mmol/l	10.1-12 mmol/l	8.1-10 mmol/l
+4 IE	+2 IE	unchanged

Table 2 shows recommended adjustments of insulin, NovoRapid®, dose according to pre-prandial blood glucose measurements.