

Supplementary table 1. Insulin dosage was adjusted daily as follows

If fasting capillary glucose was < 140 mg/dL without hypoglycemia, the dose remained unchanged.				
If between 140–180 mg/dL, the total insulin dose was increased by 10%.				
If > 180 mg/dL, the dose was increased by 20%.				
If < 70 mg/dL, the total daily dose was reduced by 20%.				
Additional lispro insulin was administered if fasting > 140 mg/dL or postprandial capillary glucose persisted > 180 mg/dL despite the previously assigned regimen:				
Supplementary regimen	Sensitive	Usual	Resistant	
Blood capillary glucose (mg/dL)	Insulin units	Insulin units	Insulin units	
181-220	4	6	8	
221-260	6	8	10	
261-300	8	10	12	
301-350	10	12	14	
351-400	12	14	16	
> 400	14	16	18	

If a patient was able to eat all or most of their meals, supplemental insulin lispro was administered following the "usual" column. If a patient had soft tissue infection, was > 70 years old or GFR 16-30 ml/min supplemental lispro insulin was administered following the "insulin sensitive" column. If the capillary glucose was persistently > 180 mg/dL in absence of hypoglycemia, the insulin scale from the "sensitive" column to "usual" or from the "usual" column to the "resistant" column was increased.

Supplementary table 2. Primary efficacy, secondary safety, and descriptive outcomes
(per protocol analysis)

	Basal-bolus regimen (n = 28)	NPH basal regimen (n = 31)	Risk ratio (95% CI)	p
Primary efficacy outcomes				
Mean total glucose (mg/dL)	141.8 ($\pm$ 17.4)	140.3 ($\pm$ 23.7)		0.781 ^a
Mean fasting glucose (mg/dL)	130.3 ($\pm$ 20.9)	126 ($\pm$ 22)		0.114 ^d
Mean postprandial glucose (mg/dL)	150.8 ($\pm$ 22.8)	149.4 ($\pm$ 28.1)		0.833 ^a
Sustained control	20 (71.4%)	30 (96.8%)	0.74 (0.58-0.94)	0.009 ^c
Secondary safety outcomes				
No. of hypoglycemic events	31	21		
Mild hypoglycemic events	30 (96.7%)	20 (95.2%)	1.02 (0.91-1.14)	1 ^c
Severe hypoglycemic events	1 (3.2%)	1 (4.7%)	0.68 (0.04-10.24)	1 ^c
Fasting hypoglycemic events	7 (22.5%)	8 (38%)	0.59 (0.25-1.39)	0.225 ^b
Patients with at least one hypoglycemic event	13 (46.4%)	13 (41.9%)	1.11 (0.62-1.97)	0.729 ^b
Patients with two or more hypoglycemic events	7 (25%)	1 (3.2%)	7.75 (1.02-59.13)	0.021 ^c
No. of total events/patient hypoglycemic	2.4 ($\pm$ 1.3)	1.6 ($\pm$ 0.7)		0.129 ^d
Descriptive outcomes				
In-hospital complications				
Soft tissue infections	9 (32.1%)	12 (38.7%)	0.83 (0.41-1.67)	0.596 ^b
Pneumonia	1 (3.6%)	0 (0%)	0	0.474 ^c
Acute respiratory failure	0 (0%)	1 (3.2%)	0	1
Acute renal failure	1 (3.6%)	0 (0%)	0	0.474
Death*	1 (3.6%)	0 (0%)	0	0.474
Failure to sustain control due to hypoglycemia	8 (28.6%)	1 (3.2%)	8.86 (1.18-66.44)	0.009
Number of days to reach control	4.9 ($\pm$ 2.2)	4.7 ($\pm$ 2.4)		0.553 ^d

*Death was not associated with the use of insulin.

^a. Student's t.

^b. Chi-square test.

^c. Fisher's exact test.

^d. Mann-Whitney U-test.

Supplementary table 3. Causes of admission

Causes of admission	Total of patients (n = 75)	Basal-bolus regimen (n = 36)	NPH basal regimen (n = 39)	p
Abscesses and soft tissue infections	19 (25%)	6 (16.7%)	13 (33.3%)	0.097 ^a
Hip fracture	15 (20%)	6 (16.7%)	9 (23.1%)	0.488 ^a
Diabetic foot	9 (12%)	7 (19.4%)	2 (5.1%)	0.078
Other fractures	8 (10.7%)	4 (11.1%)	4 (10.3%)	1
Cancer	4 (5.3%)	1 (2.8%)	3 (7.7%)	0.615
Heart disease	4 (5.4%)	1 (2.8%)	3 (7.7%)	0.615
Upper gastrointestinal bleeding	3 (4%)	2 (5.6%)	1 (2.6%)	0.604
Acute cholecystitis	2 (2.7%)	1 (2.8%)	1 (2.6%)	1
Chronic kidney disease stage IV	2 (2.7%)	2 (5.6%)	0 (0%)	0.227
Pneumonia	2 (2.7%)	1 (2.8%)	1 (2.6%)	1
Gonarthrosis	1 (1.3%)	1 (2.8%)	0 (0%)	0.479
Urinary tract infection	1 (1.3%)	0 (0%)	1 (2.6%)	1
Intoxications	1 (1.3%)	1 (2.8%)	0 (0%)	0.479
Meningitis	1 (1.3%)	0 (0%)	1 (2.6%)	1
Obesity hypoventilation syndrome	1 (1.3%)	1 (2.8%)	0 (0%)	0.479
Venous thrombosis	1 (1.3%)	1 (2.8%)	0 (0%)	0.479
Obstructive uropathy	1 (1.3%)	1 (2.8%)	0 (0%)	0.479

Fisher's exact test was used.

*Unless otherwise indicated, results are reported as mean and standard deviation.

^a. Chi-square test.