

METFORMIN*

INITIAL THERAPY FOR PATIENTS WITH T2D

Avoid if decompensated Heart Failure or eGFR < 30

Reduce dose if eGFR 30 - 59

CHOICE OF AGENT AFTER METFORMIN THERAPY IS BASED ON CV OUTCOME TRIAL EVIDENCE



**POSITIVE CV
Outcome Data**

Canagliflozin (*Invokana*)
Decreased CV events with
no change in CV death

Empagliflozin (*Jardiance*)
Decreased Death From CV
Causes, Death From Any
Cause & Hospitalization
For Heart Failure

Liraglutide (*Victoza*)
Decreased death from
CV causes, & Death from
any cause



**NEUTRAL CV
Outcome Data**

Exenatide (*Bydureon & Byetta*)

Sitagliptin (*Januvia*)

Saxagliptin (*Onglyza*)
Avoid if risk of Heart Failure

Insulin Degludec (*Tresiba*)

Insulin Glargine
(*Lantus & Toujeo*)

Pioglitazone (*Actos*)
Occasionally used if severe
insulin resistance, avoid if
risk of Heart Failure



**PENDING CV
Outcome Data**

Dulaglutide (*Trulicity*)
REWIND reports in 2018

Dapagliflozin (*Forxiga*)
DECLARE reports in 2019

Glimiperide (*Amaryl*)
CAROLINA reports in 2019

Linagliptin (*Trajenta*)
CARMELINA reports in 2019

**Metformin should be the initial therapy in patients with T2DM as per the panel recommendations.
When selecting an agent to add, consider the clinical cardiovascular evidence or outcome data.*

Note: There are no CV outcomes data pending for SU's other than glimepiride.