Effectiveness and safety of IDegLira and IGlarLixi in real-world patients with type 2 diabetes

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Background/Aims: The efficacy of fixed-ratio combinations of the basal insulin and the glucagon-like peptide-1 receptor agonist(GLP-1RA) has been fully evaluated in clinical trials. But real-world evidence is limited. This study was performed to find out efficacy and safety of fixed-ratio combinations of insulin degludec/liraglutide(IDegLira) and insulin glargine/lixisenitide(IGlarLixi) in real-world patients with type 2 diabetes at a single Korean General Hospital. We compared the effectiveness and gastrointestinal side effects of IDegLira & IGlarLixi according to baseline regimen subgroups.

Methods: This retrospective chart review comprised 54 patients with type 2 diabetes, who started IDegLira or IGlarLixi at least 3 months before the data collection. Clinical characteristics were assessed at baseline(defined as the data recorded at the first IDegLira or IGlarLixi prescription) and the latest data available after commencing IDegLira or IGlarLixi. Patients were excluded if they had previously prescribed GLP-1RA before. Effectiveness was defined as reductions of HbA1c at least 10% from baseline. We compared effectiveness and the percentage of discontinuation due to gastrointestinal side effects of IDegLira & IGlarLixi according to baseline regimen subgroups.

Results: Baseline regimens included oral hypoglycemic agents(OHAs) only (10 patients, 18%), basal insulin ± OHAs(29 patients, 54%), premixed insulin or basal-bolus insulin ± OHAs(15 patients, 28%). IDegLira & IGlarLixi were effective in 70% (n=7), 53%(n=15) and 40%(n=6) of patients subgroups respectively. The percentage of discontinuation due to GI side effects was 20%(n=2), 10%(n=3), 47%(n=7) of patients of subgroups respectively. There was no significant correlation between effectiveness and age, sex, BMI, c-peptide, duration of diabetes.

Conclusions: In out study, IDegLira & IGlarLixi were the most effective in OHAs only group and the worst effective in premixed insulin or base-bolus insulin group. GI side effects were found to be more than expected and the most prevalent in premixed insulin or basal-bolus insulin groups. No significant correlation between effectiveness of IDegLira & IGlarLixi and clinical characteristics was found.