ADEQUACY AND EFFECTIVENESS OF LIRAGLUTIDE IN PATIENTS WITH TYPE-2 DIABETES MELLITUS



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Background

Liraglutide is a human glucagon-like peptide-1 analog (GLP-1) indicated in the treatment of adults with type 2 diabetes mellitus to achieve glycemic control, combined with oral antidiabetic agents, increases insulin secretion and decreases glucagon secretion, in a glucose-dependent manner.

Purpose

To analyze the adequacy and effectiveness of liraglutide in patients with type 2 diabetes mellitus.

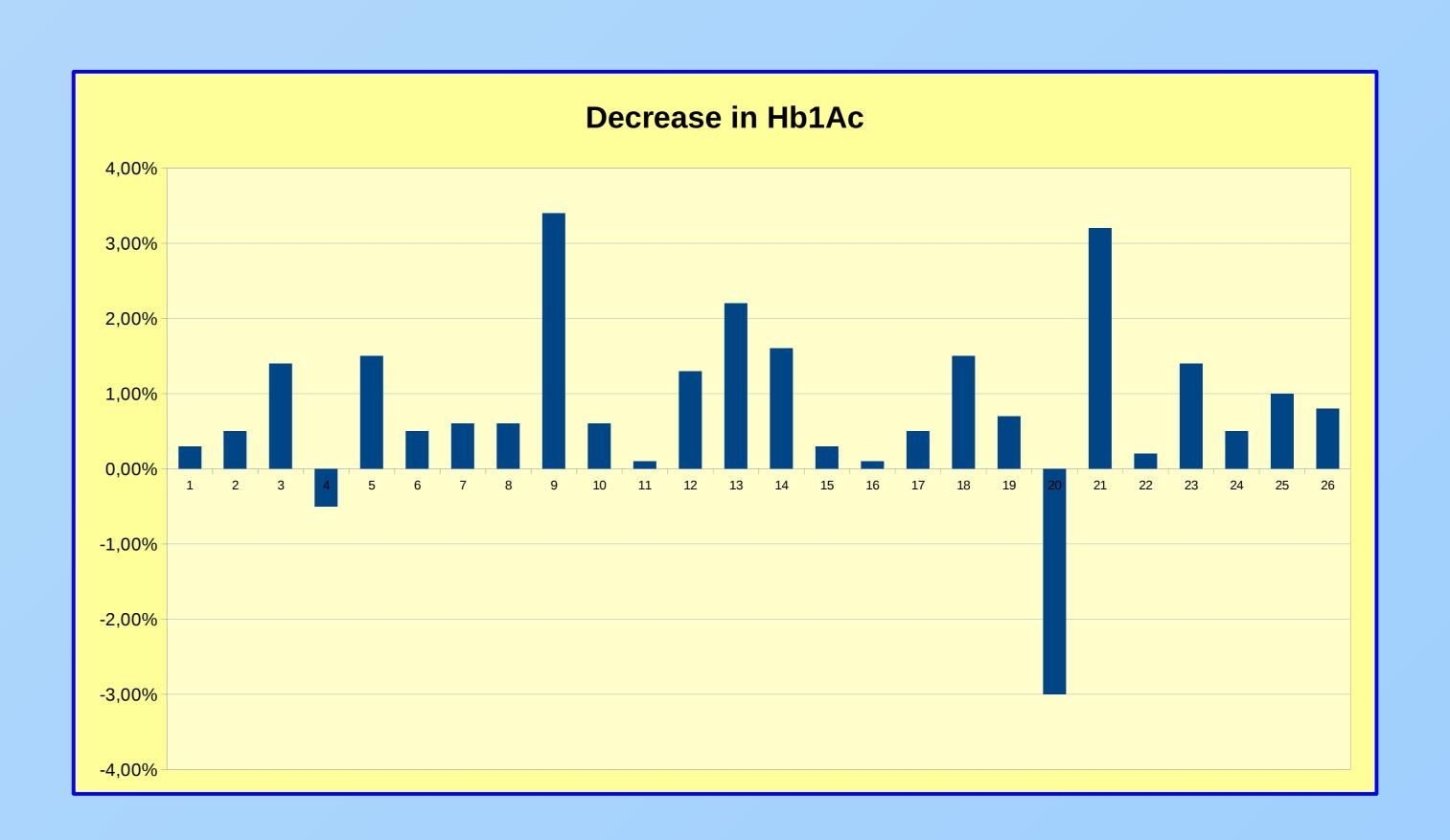
Material and methods

Retrospective 2-year observational study (September 2014 - September 2016) of all patients with type 2 diabetes mellitus treated with liraglutide for at least 6 months. Data were obtained from the application of laboratory tests, electronic medical records (DIRAYA) and the application of endorsement. The variables collected were: sex, age, time of initiation of treatment with liraglutide and value of glycosylated hemoglobin (HbA1c) before and after 6 months of treatment. Adequate use of liraglutide was considered when baseline HbA1c was greater than or equal to 7.5% and treatment was effective if reduction of HbA1c at 6 months was greater than or equal to 1%.

Results

The total number of patients with type 2 diabetes mellitus treated with liraglutide during the study period was 32. Six patients were excluded due to lack of data. Of the remaining 26 patients, 14 (54%) were women with a median age at the start of treatment of 51 years (37-68). According to the HbA1c values, 73% of the patients met criteria of adequacy of liraglutide use.

Median HbA1c at baseline: 8.6% (5.4-13.6) and median HbA1c at 6 months of treatment: 7.4% (5.2-10.6). For 11 patients (42%), treatment with liraglutide was considered effective. In all but 2, there was a decrease in HbA1c. The mean decrease in Hb1Ac in successful patients was 1.03%.



Conclusions

Several studies have shown that the addition of liraglutide to oral antidiabetic drugs is associated with better glycemic control in patients with type 2 diabetes mellitus. In our study, despite adequate use in most patients, the decrease in HbA1c was not sufficient to be considered effective in more than half of patients.

