4CPS-005

## GLP-1 AGONIST LIRAGLUTIDE AS ADD-ON THERAPY IN TYPE 2 DIABETES

D. Blanquez Martinez<sup>1</sup>, M. Hayon Ponce<sup>2</sup>, I. Casas Hidalgo<sup>1</sup>, X. Diaz Villamarin<sup>1</sup>, R. Alvarez Sanchez<sup>\*1</sup>, P. Nieto Gomez<sup>1</sup>, C. Davila Fajardo<sup>1</sup>

'Farmacia Hospitalaria, <sup>2</sup>Endocrinologia y Nutrición

Hospital Universitario San Cecilio, Granada, Spain



### OBJECTIVE

The aim of this study was to evaluate the real-world efficacy and safety of adding Liraglutide in inadequately controlled patients with oral antidiabetic drugs

#### MATHERIAL AND METHODS

This observational study assessed the efficacy and safety of GLP-1 agonist Liraglutide used as add-on therapy in a group of 83 type 2 diabetes (T2DM) patients from a community endocrinology practice during 6 months (July to September 2017). We have retrospectively analysed epidemiological, anthropometric and laboratory data. Primary endpoint was changes in glycated hemoglobin (HbA1C), secondary endpoints included changes in body mass index (BMI), blood pressure (BP), biochemical parameters and percentage of patients reporting adverse effects of therapy.

#### RESULTS

83 patients were included (54.2% male, 45.8 female) Mean duration of T2DM 9.46+/-5.46 years

Characteristics/Outcomes	Prior to treatment	After 6 months
Age (years)	56,76 ± 9,87	
BMI (Kg/m²)	37.68+/-6.82	36.08+/-6.32 (p<0,001)
SBP (mmHg)	138.80+/-15.46	132.76+/-12.11 (p<0,001)
DBP (mmHg)	82.87+/-10.16	77.41+/-5.62 (p<0,000)
Fasting glucose (mg/dl)	187.33+/-55.11	165.16+/-56 (p<0,003)
HbA1C (%)	8.62+/-1.3	7.73+/-1.33 (p<0,001)
TC (mg/dl)	178,1 ± 35,74	170,6 ± 39,19 (p<0,23)
LDL-C (mg/dl)	97,66 ± 32,16	87,74 ± 30,5 (p<0,007)
HDL-C (mg/dl)	44,54 ± 13,78	46,25 ± 15,03 (p<0,151)
TG (mg/dl)	197,64 ± 24,19	198,29 ± 22,29 (p=0,957)
AST (U/L)	29 ± 20,31	24,97 ± 12,49 (p=0,051)
ALT (U/L)	39,88 ± 31,69	32,76 ± 18,24 (p=0,026)

Any adverse effect was reported

# CONCLUSION

Six-month therapy with Liraglutide improves not only glycemic control (HbA1C, fasting glucose) but also cardiovascular risk factor (BMI,blood pressure,c-LDL), reducing SBP and DBP by 1 to 5 mmHg, therefore Liraglutide may offer an alternative therapy for these patients and will help provide extra cardiovascular benefits