The long term effect of metformin plus DPP-4 inhibitor switching from metformin plus pioglitazone combination therapy in Type 2 diabetes

> Yonghyun Kim, Donghyun Shin **Endocrinology Dept., Internal Medicine** Bundang Jesaeng Hospital, Seongnam, S. Korea

## Background

- Two years ago, we presented the short term 6 month results of metformin plus DPP-4 inhibitor combination therapy when we can't reach the target below 7% of HgA1c with metformin plus pioglitazone combination that is best in terms of relieving insulin resistance in early diabetes,
- Switching the pioglitazone to the DPP-4 inhibitor that improves insulin secretory dysfunction can be the next useful step to attain glucose control goal.
- DPP-4 inhibitors that increase insulin secretion by glucose dependent manner can also relieve insulin resistance because they improve first phase insulin secretion defect and prevent late hyperinsulinemia.
- DPP-4 inhibitor is also better than pioglitazone in weight aspect.

## Method

- Total 111 patients were followed by 26.5 month ( $\pm$  9.7) after switching from metformin plus pioglitazone.
- 15mg of pioglitazone that is usual dosage in this country was switched to DPP-4 inhibitors without changing the dose of metformin.
- The change of medication during follow up was examined.
- HgA1c level, insulin resistance index HOMA-IR, weight change before and after switching was compared in patients who maintained metformin plus first dose of DPP-4 inhibitor.

## Result

- Sulfonylurea was added in 6% (7/111) and pioglitazone was added again in 7% (7/111) for adequate glucose control.
- The dose of DPP-4 inhibitor was decreased in 6% (7/111) during the follow up period.
- Metformin plus first dose of DPP-4 inhibitor was maintained in 80% (89/111).
  - The dose of metformin was increased in 41 % ( 40/89) and unchanged in 42% (41/89) and decreased in 7%.
  - The mean dose of metformin to maintain HgA1c target was elevated by 260 mg in the end.
  - HgA1c was improved in 76% (68/89) from 7.40% to 6.66% and the metformin dose was increased by 240 mg. HgA1c was aggravated in 22% (20/89) from 6.85% to 7.22%.
  - HOMA-IR was improved in 46% ( $0.91\pm0.92$ ) and aggravated in 53% (-1.25±1.17). Mean HOMA-IR change was  $-0.24 \pm 1.51$ .
  - Mean weight was reduced by 2.23kg  $(\pm 3.17)$  as a whole. The weight was decreased in 72% (3.63 $\pm$ 2.51) and increased in 19% (1.77 $\pm$ 1.73)

## Conclusion

Although the dose of metformin was slightly increased to maintain glucose control target with time, metformin plus DPP-4 inhibitor combination can be a good treatment option in controlling blood glucose & maintaining insulin resistance & as compared to metformin plus pioglitazone combination. weight control