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Clinical Expert Summary

Saxagliptin (Onglyza[®]▼) for the treatment of adult patients aged 18 years and older with type 2 diabetes mellitus to improve glycaemic control in combination with insulin (with or without metformin), when this regimen alone, with diet and exercise, does not provide adequate glycaemic control.

The All Wales Therapeutics and Toxicology Centre received views from one clinical expert who declared a personal specific interest.

1. Existing guidelines

It was suggested that Health Boards in Wales would typically follow National Institute for Health and Clinical Excellence (NICE) guidelines¹ in prescribing gliptin agents for patients with type 2 diabetes mellitus.

2. Disease prevalence

The number of patients who gain a substantial improvement in HbA1c with the insulin-gliptin combination is relatively small. By applying the stopping rules for gliptin use in NICE CG87¹ (0.5% reduction in HbA1c), the amount of co-prescribing is further reduced.

3. Current treatment options

The expert stated that pioglitazone and sitagliptin, which is licensed for this indication, are used in this setting. The advantage of gliptins as add-on to insulin is their weight neutrality. GLP-1 injectables have often been used off-licence with insulin due to their impact on weight and exenatide (Byetta[®]▼) now has a licence for insulin-combination use. The expert expressed their preference for a gliptin over pioglitazone, due to the better side-effect profile (of which weight gain is a major issue).

4. Unmet needs

The expert commented that patients with type 2 diabetes who are treated with insulin often have (very) sub-optimal control and are overweight. Increasing doses of insulin typically increases their weight further, with little impact on HbA1c and also puts them at risk of hypoglycaemia; hence additional oral agents in combination with insulin are used.

5. Knowledge of product in given indication

It was stated that saxagliptin is not a new product. The number of patients who gain a substantial improvement in HbA1c with the insulin-gliptin combination is relatively small and that most, if not all prescribing, would be done in secondary care.

1 National Institute for Health and Clinical Excellence. Clinical guideline 87. Type 2 diabetes: the management of type 2 diabetes. May 2009. Available at: <http://www.nice.org.uk/nicemedia/live/12165/44320/44320.pdf>. Accessed Mar 2012.