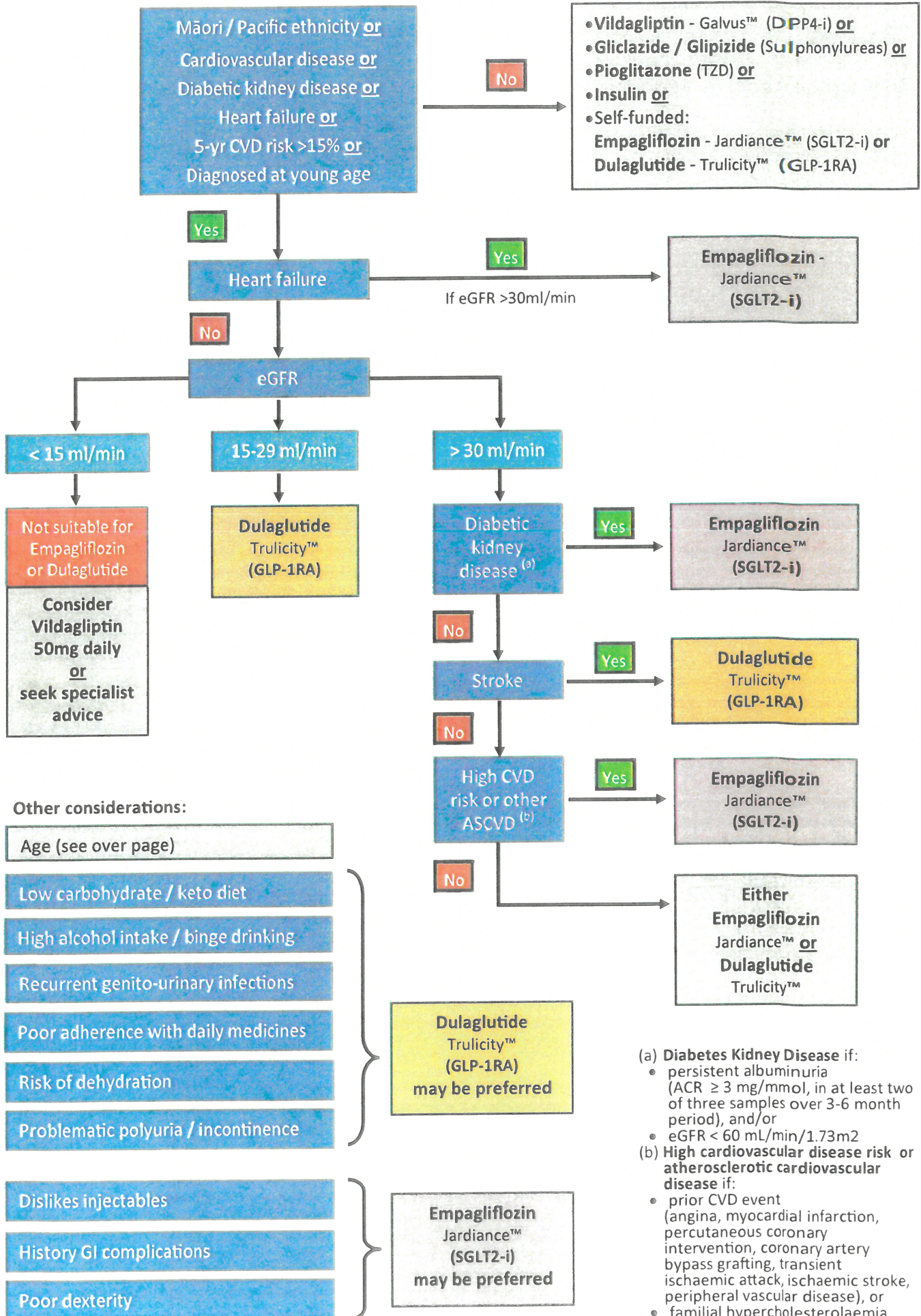


Decision tool to aid in initiating second-line Type 2 Diabetes medication

Reinforce lifestyle modifications (diet, exercise). Check for medicine adherence and tolerance to current diabetes medication.



Other considerations:

- Age (see over page)
- Low carbohydrate / keto diet
- High alcohol intake / binge drinking
- Recurrent genito-urinary infections
- Poor adherence with daily medicines
- Risk of dehydration
- Problematic polyuria / incontinence
- Dislikes injectables
- History GI complications
- Poor dexterity

Dulaglutide Trulicity™ (GLP-1RA) may be preferred

Empagliflozin Jardiance™ (SGLT2-i) may be preferred

(a) **Diabetes Kidney Disease** if:

- persistent albuminuria (ACR ≥ 3 mg/mmol, in at least two of three samples over 3-6 month period), and/or
- eGFR < 60 mL/min/1.73m²

(b) **High cardiovascular disease risk or atherosclerotic cardiovascular disease** if:

- prior CVD event (angina, myocardial infarction, percutaneous coronary intervention, coronary artery bypass grafting, transient ischaemic attack, ischaemic stroke, peripheral vascular disease), or
- familial hypercholesterolaemia

Age Considerations:

Age	Empagliflozin (Jardiance™)	Dulaglutide (Trulicity™)
65 – 74 years	Dosed as per renal function.	No dose adjustment is required based on age.
75 – 84 years	May still be considered if strongly indicated and adequate eGFR. Use with caution – Increased risk of dehydration and hypotension. Reduced efficacy has been observed.	Considered safe and effective in older adults. Use with caution – Increased risk of hypoglycaemia with insulin / sulphonylureas.
> 85 years	<p>Initiation not recommended. Limited evidence of therapeutic benefit.</p> <p>Glycaemic control should reflect stage of life (including cognitive function, functional status, life expectancy, falls risk and vulnerability).</p> <p>Tailor hypoglycaemic drugs to reduce risk of hypoglycaemia, while minimising symptomatic hyperglycaemia.</p> <p>If frail/ dementia / limited life expectancy, consider vildagliptin 50mg once daily.</p>	

Funded products in New Zealand:

<p>GLP-1RA (Glucagon-Like Peptide-1 Receptor Agonist): Trulicity™ (dulaglutide)</p>
<p>SGLT2-i (Sodium Glucose Cotransporter-2 Inhibitor): Jardiance™ (empagliflozin) Jardiamet™ (empagliflozin + metformin)</p>
<p>DPP4-i (Dipeptidyl Peptidase-4 Inhibitors): Galvus™ (vildagliptin) Galvumet™ (vildagliptin + metformin)</p> <p>Sulphonylureas: (gliclazide) (glipizide)</p> <p>Thiazolidinediones: (pioglitazone)</p>

References:

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- ii. NZSSD. Management Algorithm for Type 2 Diabetes.
- iii. Paul, R. Dulaglutide and Type 2 Diabetes. Research Review. 2021
- iv. New Zealand Formulary. NZF v115. Jan 2022. Available from www.nzf.org.nz. (Accessed Jan 2022).