Healthy diet, weight control and physical activity

Efficacy is an estimated improvement in HbA1c:

- Highest Efficacy = >2% drop
- High Efficacy = 1-2% drop
- Intermediate efficacy = up to 1% drop

Contact Community Diabetes Nursing Service if HbA1c not achieved after ~3 months of triple therapy.
### Antidiabetics

<table>
<thead>
<tr>
<th>Therapeutic class</th>
<th>Drug†</th>
<th>Physiological action</th>
<th>Costs</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biguanides</td>
<td>Metformin Metformin MR</td>
<td>↓ gluconeogenesis ↑ peripheral glucose utilisation</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Sulfonylurea (SU)</td>
<td>Gliclazide Glipizide</td>
<td>Augments insulin secretion Effective but needs some residual pancreatic β-cell activity</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Thiazolidinediones (TZD)</td>
<td>Pioglitazone</td>
<td>↓ peripheral insulin resistance ↓ blood glucose concentration</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Dipeptidyl peptidase-4 inhibitors (DPP4-i)</td>
<td>Saxagliptin Vildagliptin Linagliptin Sitagliptin Alogliptin</td>
<td>↑ insulin secretion (glucose-dependent)</td>
<td>Medium</td>
<td></td>
</tr>
<tr>
<td>Sodium-glucose-cotransporter-2 inhibitors (SGLT2-i)</td>
<td>Dapagliflozin Canagliflozin Empagliflozin</td>
<td>Blocks renal glucose reabsorption ↑ glucosuria</td>
<td>Medium</td>
<td></td>
</tr>
<tr>
<td>Glucagon-like-peptide-1 receptor agonist (GLP-1)</td>
<td>Exenatide Exenatide MR Liraglutide Lixisenatide Dulaglutide</td>
<td>↑ insulin secretion (glucose-dependent)</td>
<td>High</td>
<td></td>
</tr>
</tbody>
</table>

### Prevention of Cardiovascular disease²

**Antihypertensives³**

<table>
<thead>
<tr>
<th>Target Blood Pressure 140/80mmHg (130/80 if complication present)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients aged &lt;55 years</td>
</tr>
</tbody>
</table>

**Step 1** Angiotensin-converting enzyme inhibitor (ACEI), if not tolerated angiotensin II receptor blocker (ARB-II)

**Step 2**: ACEi / ARB-II + CCB

**Step 3**: ACEi / ARB-II + CCB + Thiazide-like diuretic

**Step 4**: Resistant hypertension Add Alpha-blocker or Beta-blocker or Spironolactone

### Lipid Management†

Primary prevention – Atorvastatin; if 10-year CVD risk ≥10% (QRISK2).

Secondary prevention – Atorvastatin

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**References:**

5. NICE guidance. Type 2 diabetes: newer agents. May 2009