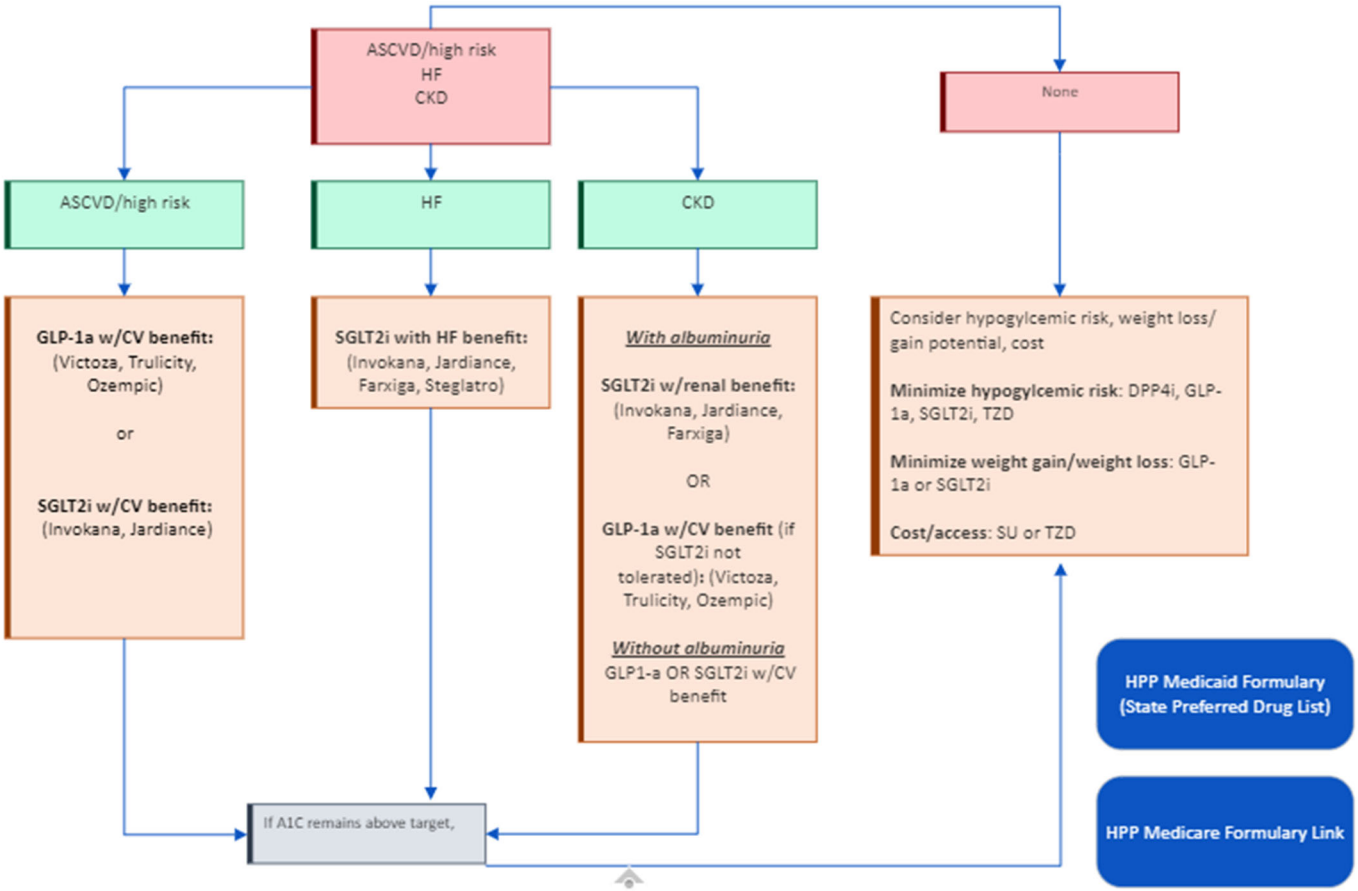
Health Partners Plans

Type 2 Diabetes Guidelines Workflow



*HbA1c goal <7.0% in most patients to reduce the incidence of microvascular disease.
*HbA1c 7.5-8.0% are the goals in patients with a history of severe hypoglycemia, limited life expectancy, advanced complications, extensive comorbid conditions
* HbA1c < 9 is the 2022 HPP QCP goal for Comprehensive Diabetes Care

Medication Classes

Sulfonylurea (SU)	Glucagon-like peptide *(GLP-1)*
○ Glipizide (Glucotrol) ○ Glyburide (Diabeta, Micronase) ○ Glyburide micronized (Glynase) ○ Glimeperide (Amaryl)	○ Exenatide (Byetta) ○ Liraglutide (Victoza) ○ Dulaglutide (Trulicity) ○ Semaglutide (Ozempic)
○ **Thiazolidinedione (TZD)**	○ **Sodium Glucose Co-Transporter 2 Inhibitors (SGLT2i)**
○ Pioglitazone (Actos) ○ Rosiglitazone (Avandia)	○ Canagliflozin (Invokana) ○ Dapagliflozin (Farxiga) ○ Empagliflozin (Jardiance)
○ **Insulin**	○ **Dipeptidyl peptidase 4 inhibitor (DPP-4)**
○ Lantus (insulin glargine) ○ Levemir (insulin detemir) ○ Tresiba (insulin degludec)	○ Sitagliptin (Januvia) ○ Saxagliptin (Onglyza) ○ Linagliptin (Tradjenta)

HbA1c Lowering %

Insulin	Variable
Metformin	1.5 %
Sulfonylurea	1.5 %
Meglitinides	1-1.5 %
TZD	0.5-1.4 %
α- Glucosidase Inhibitors	0.5-0.8 %
DPP-4 Inhibitors	0.5-1 %

Medication	Pros	Cons
Insulin	○ A1c reduction: variable	○ High cost ○ Injection ○ Hypoglycemia Risk ○ Weight gain
SGLT2i	○ CV benefit ○ Weight Loss ○ A1c reduction: 0.5-0.7%	○ High cost ○ Fracture risk ○ Genitourinary infections ○ Amputations (canagliflozin) ○ Normoglycemia DKA
GLP-1 a	○ CV benefit ○ Weight Loss ○ A1c reduction: 0.5-1.5%	○ Injection ○ High cost ○ GI upset ○ Pancreatitis risk
DPP-IV inhibitors	○ Fewer side effects ○ A1c reduction: ~1.0%	○ High cost ○ No determined CV benefits ○ HF risk (alogliptin & saxagliptin)
Sulfonylureas	○ Low cost ○ A1c reduction: 1.0-2.0%	○ Hypogylcemia risk ○ Weight gain ○ No determined CV benefits
TZDs	○ Low cost ○ A1c reduction: 0.5-1.4% ○ Some CV benefits	○ Cannot be used in patients with heart failure ○ Weight gain ○ Fracture risk ○ Bladder cancer risk

References:
1. Standards of Medical Care in Diabetes—2022 Abridged for Primary Care Providers | Clinical Diabetes | American Diabetes Association (diabetesjournals.org)
2. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3000926/