Meetings*digest*

European Association for the Study of Diabetes 47th Annual Meeting

12-16 September 2011, Lisbon, Portugal

Flexible dosing possible with insulin degludec

New data show that ultra-long-acting insulin degludec – an investigational basal insulin being developed by Novo Nordisk – can be flexibly dosed at any time of the day in people with type 2 diabetes.

The study, presented at the 47th Annual Meeting of the EASD in Lisbon, revealed that significant blood glucose reductions in people with type 2 diabetes – even when doses were given once-daily up to 40 hours apart – were achieved. HbA_{1C} levels at 26-weeks were reduced by 1.28 percentage points with insulin degludec therapy – a result comparable with insulin glargine therapy. Additionally, fasting plasma glucose reductions were significantly lower for insulin degludec (5.8 mmol/L) by study end than for insulin glargine (6.2 mmol/L; *P*<0.05).

"This study demonstrates that with insulin degludec glycaemic control can be maintained even if people unintentionally delay a dose or take their insulin at a different time of the day," said Professor Stephen Atkin, lead author of the study and Head of Academic Endocrinology, Diabetes and Metabolism, York Hull Medical School.

Cardio-protective role for DPP-4 inhibitors

Edoardo Mannucci, Careggi Teaching Hospital, Florence, Italy reported making a "an unexpected and surprising finding" while searching for potential cardiovascular risk among studies involving dipeptidyl peptidase-4 (DPP-4) inhibitors in people with type 2 diabetes; participants who were randomised to receive DPP-4 inhibitor therapy appeared to have fewer cardiac events, suggesting a cardio-protective role for the agents.

It was reported at the EASD's Annual Meeting that, after reviewing outcomes in 53 clinical trials involving more than 33 000 participants, people receiving DPP-4 inhibitor therapy had a 30% relative risk reduction of suffering a major cardiac event.

IDF release new Diabetes Atlas at the EASD Annual Meeting

New Diabetes Atlas figures released at the EASD Annual Meeting by the International Diabetes Federation (IDF) confirm that the diabetes epidemic continues to worsen.

Data from global studies demonstrate that the number of people with diabetes in 2011 has reached 366 million. Annually, some 4.6 million deaths are attributable to the condition and health care spending on the management of diabetes has reached US\$465 billion.

These figures came before the planned UN Summit on Noncommunicable Diseases and IDF President Jean Claude Mbanya and EASD Vice-President Andrew Boulton warned that "further research is essential if we are to truly defeat these diseases".

Subcutaneous delivery of exenatide phase II results

Data from a 48-week phase II clinical study of subcutaneous continuous delivery of exenatide with the agent ITCA 650 (Duros[®], Intarcia Therapeutics) for the treatment of type 2 diabetes were presented at the 47th Annual Meeting of the EASD in Lisbon, Portugal.

Presented by Julio Rosenstock, Director of the Dallas Diabetes and Endocrine Center at Medical City and Clinical Professor of Medicine at the University of Texas Southwestern Medical School, the data demonstrate that people receiving treatment with ITCA 650 experienced substantial and sustained reductions in HbA_{1C}, fasting plasma glucose and body weight during treatment at all doses. ITCA 650 at 20 mg/day provided improved glycemic control with the most favourable tolerability profile as a starting dose for weeks 1–12.

Favourable safety profile, HbA_{1C} lowering for linagliptin at 2 years

BI and Lilly announced results of a 102-week phase III study of their dipeptidyl peptidase-4 (DPP-4) inhibitor linagliptin that showed durable reductions in blood glucose for adults with type 2 diabetes.

Linagliptin showed a favourable safety profile and lowered HbA_{1C} levels by 0.8% over the course of the study in

those treated with the agent for the full study period.

"These results show that the efficacy achieved by linagliptin is reliable and meaningful in a clinical setting, but also that it is durable over the long term," commented Professor David Owens of the Department of Medicine, Cardiff University.