Anti-hyperglycaemic Therapies Comparative Safety

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Type 2 diabetes at the Newcastle Diabetes Centre

- > Around 4000 patients under care
- > 2830 on Annual Review database for 1998
 - > Diet-alone 680 (24)
 - > Sulphonylurea 948 (33)
 - > Metformin 711 (25)
 - > Insulin 922 (33)

n (%)

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Clinical Management of Type 2 Diabetes

- > Serious condition
- > Treatment required and effective
- > Limited number of treatment options
- > All options have potential for adverse effects
- > Treatment benefits exceed risk

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Serious Adverse Effect Profiles of Anti-hyperglycaemic Drugs

h	Disabling ypoglycaemia	Lactic acidosis	Acute hepatic injury
Sulphonylureas	s +	_	_
Metformin	_	+	_
Troglitazone	_	_	+
Insulin	+	_	-
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Metformin

- > Recently approved (USA)
- > Similar exposure to troglitazone
- > Well characterized adverse event profile

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Metformin - Serious Adverse Events US Post-marketing reports

- > First year in the market
- > ~1 million people exposed
- > 47 cases confirmed lactic acidosis
- > 20 deaths
- > Estimated event rate:
 - 4.7 per 100,000-pt (1/20 000)

Misbin et al 1998.

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Metformin and troglitazone – fatal events Comparative first-year post-marketing data

	Metformin ^a	Troglitazoneb
Dates	May 1995- Jun 1996	Mar 1997- Apr 1998
Exposure	1 000 000	1 050 885
Fatal events	20	17
Rate (per 100,000-pt)	2.0	1.7

^aMisbin et al 1998, NEJM.

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^bMisbin 1999, Ann Int Med.

Metformin-related lactic acidosis Swedish Adverse Drug Reactions Advisory Committee

Report	Campbell 1985 Berger 1985	Wiholm & Mynhed 1993	Wiholm & Mynhed 1993
Years	1972-1981	1977-1981	1987-1991
Cases	8.4	15.0	2.4
Deaths	2.4	N.D.	N.D.

Rates per 100,000-pt-yr.

N.D. = No Data

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Metformin-related lactic acidosis (2)

Report Berger & Bailey & Strang et al Amrein 1978 Nattrass 1998 1997 1980-1985 Years 1972-1977 1976-1986 Country Switzerland UK Canada 2.7 Cases 6.7 18 N.D. 9 **Deaths** N.D.

Rates per 100,000-pt-yr.

N.D. = No Data

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Metformin-related lactic acidosis - Conclusion

Cases 2.4 - 18.0

Deaths 0.9 - 9.0

Rates per 100,000-pt-yr.

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Sulphonylurea-related severe hypoglycaemia Swedish Adverse Drug Reactions Advisory Committee 1972-1987

Report Asplund et al, 1983 Asplund et al, 1991

Analysis Campbell, 1985 Home, 1999

Years 1971-1981 1980-1987

Drug glyburide glipizide

Cases (n, rate) 51, 19.0 19, 15.0

Deaths (n, rate) 10, 3.2 2, 1.6

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Hypoglycaemia on sulphonylureas Database studies

Author	Database	Definition	Rate	Death
Shorr et al 1996	Tennessee Medicaid/ Medicare	Hospital- requiring	1,230	0.8
van Staa et al 1997	UK General Practice (VAMP)	Physician- requiring	1,770	N.D.

Rate per 100,000-pt-yr, death %-cases. N.D. = No Data

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Sulphonylurea-related severe hypoglycaemia Conclusion

Cases 1.9 – 1,770

Deaths 1.4 - 9.8

Rates per 100,000-pt-yr.

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Hypoglycaemia in the UKPDS

	All (100,000-pt-yr	Severe ^a -1)(100,000-pt-yr ⁻¹)	Death (n)
Chlorpropamide	11,000	400	0
Glibenclamide	17,700	600	0
Insulin	36,500	2,300	1

^aRequiring assistance.

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Insulin-related hypoglycaemic death

- > Perceived uncommon in Type 2 diabetes
- > UKPDS: 1 death / 1500 patients
- > Risk estimate too uncertain to calculate

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Type 2 diabetes Therapy-related severe adverse events

	Deaths
Metformin	0.8-9.0
Sulphonylureas	1.4-9.8
Insulin	(5.0–50.0)
Troglitazone	2.0

Rates per 100,000-pt-yr.

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Type 2 diabetes	
Rates of benefit from th	erapy - deaths

Deaths in	Type 2	diabetes		
All		Diabetes-	Prevented	
	(rate)	related (rate)	(%)	(rate)
LIKEDO	1 040	4 400		1100
UKPDS	1,840	1,100	-10	110.0
WESDR	6.240	3.510	N.D.	350.0

Rate per 100,000-pt-yr. N.D. = No Data

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Serious Adverse Events in Type 2 Diabetes Conclusion

- All drug treatments for Type 2 diabetes carry some risk
- The risk is low particularly compared to benefit
- Risk from troglitazone is comparable to established therapies
- > Troglitazone risk has decreased with time

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