

NEW INSULIN DEGLUDEC REDUCES HYPOGLYCEMIA IN PATIENTS WITH TYPE 1 DIABETES AT HIGH RISK OF HYPOGLYCEMIA



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Objectives

Intensive Insulin Therapy (IIT) is a therapeutic regimen for the treatment of type 1 diabetes (T1D). It is a common notion that more frequent hypoglycemia is a disadvantage of intensive regimens. Many patients, who have had diabetes for a long time, do not notice the signs of hypoglycemia or they do not recognize the condition as it occurs without associated symptoms or during sleep. Severe hypoglycemia can be lifethreatening.

Materials and methods

In 10 T1D patients suffering from frequent severe hypoglycemia receiving treatment in the form of conventional IIT. We have replaced their conventional basal insulin with a new ultra-long-acting basal insulin analogue degludec (IDeg).

Results

This exploratory analysis included 10 T1D patients (30% female) with frequent low glucose concentrations and the following baseline characteristics: mean (\pm SD) age 49.9 \pm 11.8 years, duration of T1D 17 \pm 8.5 years, HbA_{1c} <8.52 \pm 1.5%, BMI 25.5 \pm 4.6kg/m², waist 94.7 \pm 10.1 cm, weight 77.3 \pm 12.1 kg. HbA1c decreased from 8.52% to 8.07% after 10 months without any changes in other parameters without hypoglycemia in the total treatment period with IDeg.

Conclusions

Hypoglycemia represents a great challenge for both the patient and the healthcare professional; however, hypoglycemia can be successfully managed. After replacing the conventional basal insulin with an ultralong-acting basal insulin analogue degludec this resulted in a consistent reduction in hypoglycemia with improved glycemic control in T1D on IIT patients at high risk of hypoglycemia.