Health Facts for You

UWHealth

Medicines to Treat Diabetes

There are many medicines used to treat diabetes. They are used along with a healthy eating meal plan and activity. You and those on your health care team will choose which medicines are best for you.

Medicine Names	Key Points
 Biguanides Examples: Metformin (Glucophage[®]) Metformin extended release (Glucophage XR[®], Fortamet[®], Glumetza[®], Riomet[®]) 	 How they work: Help muscle cells use glucose Lower the amount of glucose your liver makes Lower the amount of glucose your body absorbs from the food you eat Possible side effects: Nausea or upset stomach Diarrhea Bloating Decreased appetite Notes: Take with food to decrease side effects Must swallow extended release tablets whole May need to stop for surgery, certain scans or x-rays Expected decrease in A1C: 1-2%
 Sulfonylureas Examples: Glipizide (Glucotrol[®]) Glipizide extended release (Glucotrol XL[®]) Glimepiride (Amaryl[®]) Glyburide (Diabeta[®], Micronase[®]) 	 How they work: Help your pancreas make more insulin Possible side effects Low blood sugar Weight gain Headache Stomach upset Notes: Do not take if you will not be eating within 30 minutes Avoid with sulfa allergy Expected decrease in A1C: 1-2%
 Meglitinides Examples: Repaglinide (Prandin[®]) Nateglinide (Starlix[®]) 	 How they work: Help the pancreas make more insulin right after you eat Possible side effects: Low blood sugars Weight gain Notes: Work best if you take before a meal Expected decrease in A1C: 0.5-1.5%

Medicine Names	Key Points
Dipeptidyl Peptidase-4 (DPP-4)	How they work:
 inhibitors Examples: Saxagliptin (Onglyza[®]) 	 Raise the amount of insulin your body makes after you eat Lower the amount of glucose your liver makes
 Sitagliptin (Januvia[®]) Linagliptin (Tradjenta[®]) Alogliptin (Nesina[®]) 	Possible side effects: • Nausea, vomiting, diarrhea • Acute pancreatitis Notes: • Do not cause weight gain
	• Expected decrease in A1C: 0.4 – 0.8%
 Thiazolidinediones ("TZDs") Examples: Pioglitazone (Actos[®]) Rosiglitazone (Avandia[®]) 	 How they work: Lower insulin resistance so that insulin can work better Reduce glucose made by the liver Possible side effects: Swelling Weight gain/fluid retention Risk of bladder cancer Risk of bone fractures Notes: Should not be used in those with heart failure Expected decrease in A1C: 0.5-1.4%
 Alpha-Glucosidase Inhibitors Examples: Acarbose (Precose[®]) Miglitol (Glyset[®]) 	 How they work: Slow the break down of sugars in the body Possible side effects: Gas, bloating, diarrhea Notes: Does not cause weight gain Must treat low blood sugar with oral glucose (dextrose), not sucrose (cane sugar) Expected decrease in A1C: 0.5-1%
 Sodium-glucose transporter 2 (SGLT2) Inhibitor Examples: Canagliflozin (Invokana[®]) Dapagliflozin (Farxiga[®]) Empagliflozin (Jardiance[®]) Ertugliflozin (Steglatro[®]) 	 How they work: Help remove glucose from the body through the urine Possible side effects: Fungal infection in female groin Urinary tract infection Increased urination Diabetic ketoacidosis (with normal or nearly normal blood glucose levels) Notes: Take before the first meal of the day Expected decrease in A1C: 0.5-1%

Non-Insulin Injectable Medicines		
Amylin Mimetics	How they work:	
Examples:	• Slow how fast the stomach empties	
• Pramlintide (Symlin [®])	• Lower the amount of glucose the liver makes	
	Side effects:	
	Low blood sugars	
	Decreased appetite	
	Redness and irritation at injection site	
	Notes:	
	May suppress hunger	
	Must use right before meals	
	• Can be used in Type 1 DM	
	• Expected decrease in A1C: 0.4-0.6%	
GLP-1 Receptor Agonists	How they work:	
Examples:	Help the pancreas to make more insulin	
• Exenatide (Byetta [®])	• Lowers the amount of glucose the liver makes	
• Exenatide extended release	Potential side effects:	
(Bydureon BCise [®])	Nausea, vomiting	
• Liraglutide (Victoza [®])	Weight loss	
• Dulaglutide (Trulicity [®])	Decreased appetite	
• Semaglutide (Ozempic [®] ,	Redness and irritation at injection site	
Rybelsus [®])	Notes:	
	May cause pancreatitis	
	Not advised for those with personal or family history of	
	medullary thyroid cancer	
	• Expected decrease in A1C: 1-1.6%	

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©5/2021. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#6264.