

ABCD liraglutide audit – the higher the baseline HbA1c the bigger the fall

Table 3 Median HbA_{1c} change, proportion of patients achieving HbA_{1c} reduction of $\geq 1\%$ and proportion of patients achieving target HbA_{1c} of 7% among patients treated with liraglutide in the ABCD audit; results stratified by baseline HbA_{1c} and use of insulin.

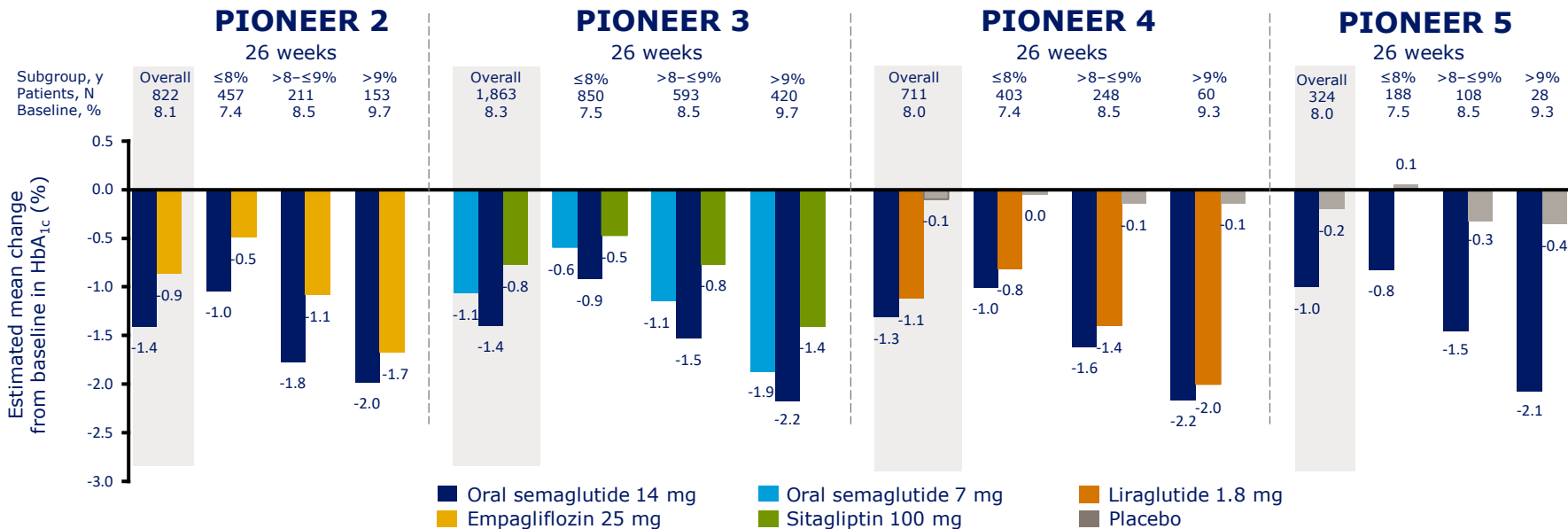
	Baseline HbA _{1c} (%)							P value
	7.0-7.9	8.0-8.9	9.0-9.9	10.0-10.9	11.0-11.9	12.0-12.9	13.0-13.9	
Non-insulin-treated								
n	81	158	161	186	60	35	11	
Median HbA _{1c} change, (%)	-0.7 [-1.1,-0.1]	-1.1 [-1.7,-0.5]	-1.4 [-2.2,-0.4]	-1.9 [-3.2,-0.9]	-2.6 [-3.9,-1.6]	-3.1 [-1.3,-4.5]	-2.0 [-0.3,-4.9]	< 0.001
Proportion achieving $\geq 1\%$ reduction, n(%)	30 (33.0)	95 (60.1)	103 (64.0)	77 (72.6)	51 (85.0)	28 (80.0)	8 (72.7)	< 0.001
Proportion achieving HbA _{1c} of 7%, n(%)	50 (55.0)	58 (36.7)	35 (21.7)	25 (23.6)	11 (18.3)	4 (11.4)	1 (9.1)	< 0.001
Insulin-treated								
n	73	124	156	98	61	35	10	
Median HbA _{1c} change, (%)	-0.2 [-0.7,0.4]	-0.5 [-1.2,0.3]	-1.1 [-2.0,-0.2]	-1.3 [-2.6,-0.5]	-1.3 [-2.5,-0.5]	-1.8 [-3.4,-0.6]	-3.6 [-4.7,-1.6]	< 0.001
Proportion achieving $\geq 1\%$ reduction, n(%)	11 (15.1)	41 (33.1)	82 (52.6)	61 (62.2)	36 (59.0)	24 (68.6)	9 (90.0)	< 0.001
Proportion achieving HbA _{1c} of 7%, n(%)	28 (38.4)	18 (14.5)	21 (13.5)	8 (8.2)	3 (4.9)	1 (2.9)	2 (20.0)	< 0.001

Median HbA_{1c} change results are shown as median [interquartile range]

Results show patients are more likely to achieve $\geq 1\%$ HbA_{1c} reduction when baseline HbA_{1c} is higher and conversely more likely to achieve target HbA_{1c} of 7% if baseline HbA_{1c} is lower.

Efficacy of oral semaglutide according to baseline HbA_{1c}

PIONEER 2, 3, 4 AND 5: TRIAL PRODUCT ESTIMAND



P values for subgroup interaction <0.05 for PIONEER 3 for 14 mg

Endpoint at week 26 (P2, P3, P4, P5). Data shown are for the trial product estimand (on trial product without rescue medication).

HbA_{1c}, glycated haemoglobin; PIONEER, peptide innovation for early diabetes treatment; N, number of patients contributing to the analysis; y, years.

Adapted from Meier J et al. *Diabetologia*, 2019;62(Suppl. 1): Abstract 51; EASD 55th Annual Meeting, 17 Sept 2019: Oral Presentation OP 09; Rodbard HW et al. *Diabetes Care* 2019;42(12):2272-2281; Rosenstock J et al. *JAMA* 2019;321:1466-80; Pratley R et al. *Lancet* 2019;394:39-50; Mosenzon O et al. *Lancet Diabetes Endocrinol* 2019;7:515-27.