

HbA1c, weight, body mass index (BMI) and systolic blood pressure changes in the Association of British Clinical Diabetologists (ABCD) nationwide dapagliflozin audit

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on behalf of the ABCD nationwide dapagliflozin
audit contributors



Background: ABCD Nationwide Dapagliflozin Audit

- Launched in October 2014
- Ongoing

Data on :

- Demographics
- Observations
- Metabolic profile
- Side effects
- Medication changes

Audit Overview(n=943)

Data Input	Oct 2014 – Oct 2015
Centres	44
Contributors	129
Number of Patients	943
Age(years)	56.7±10.4
Sex[Males(%)]	55.9%
Duration of Diabetes (years)*	11.4(6-16)
Baseline HbA1c (mmol/mol)	80.2±16.1
Baseline HbA1c(%)	9.5±1.5
BMI(Kg/m ²)	37.0±13.3
Baseline Weight(kg)	103.3±22.7
Duration of follow up(months)*	6.4(0-12.3)

Vs Combined Clinical Trials - Dapagliflozin

7.96

32.16

Reported as mean±SD or median(IQR)*

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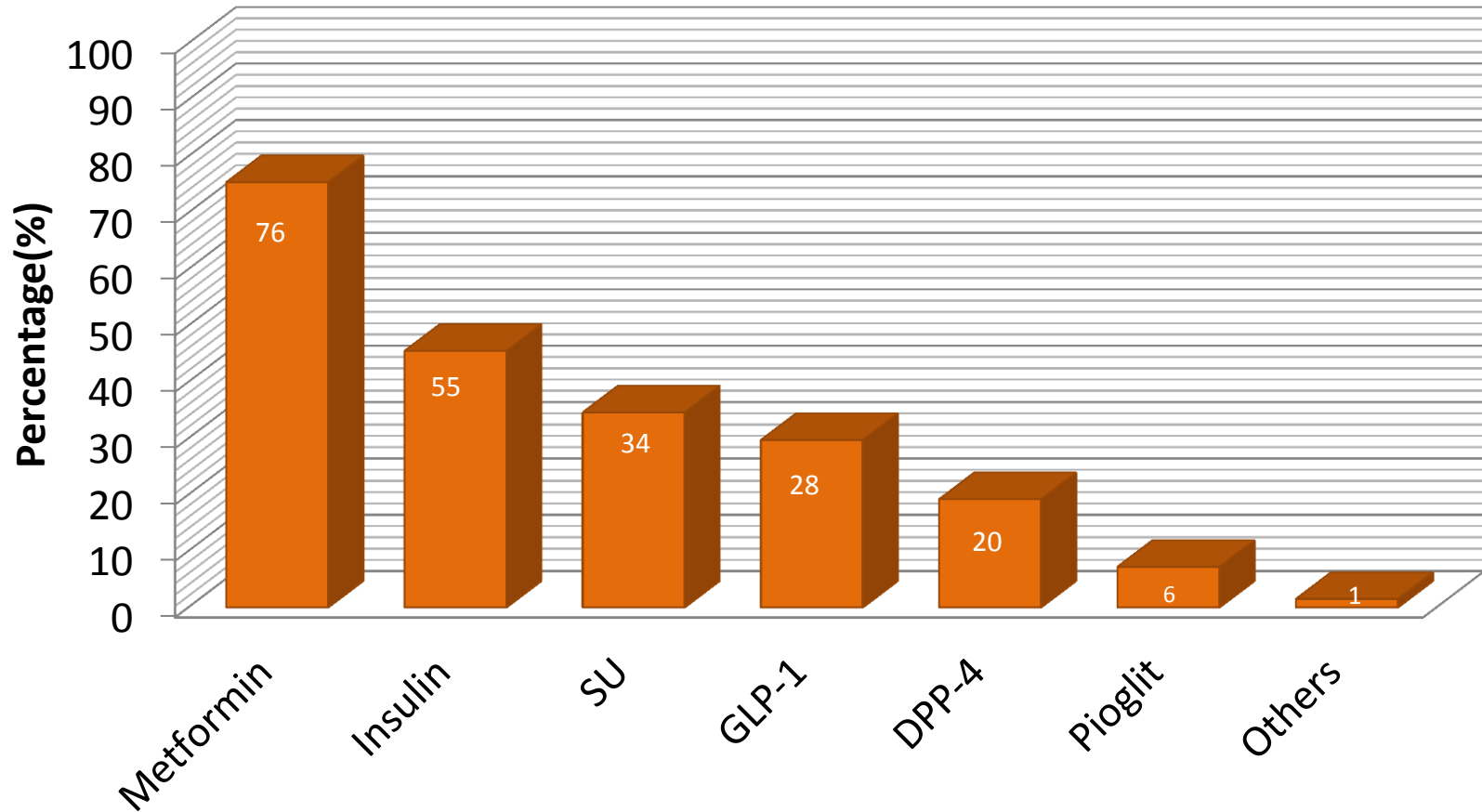
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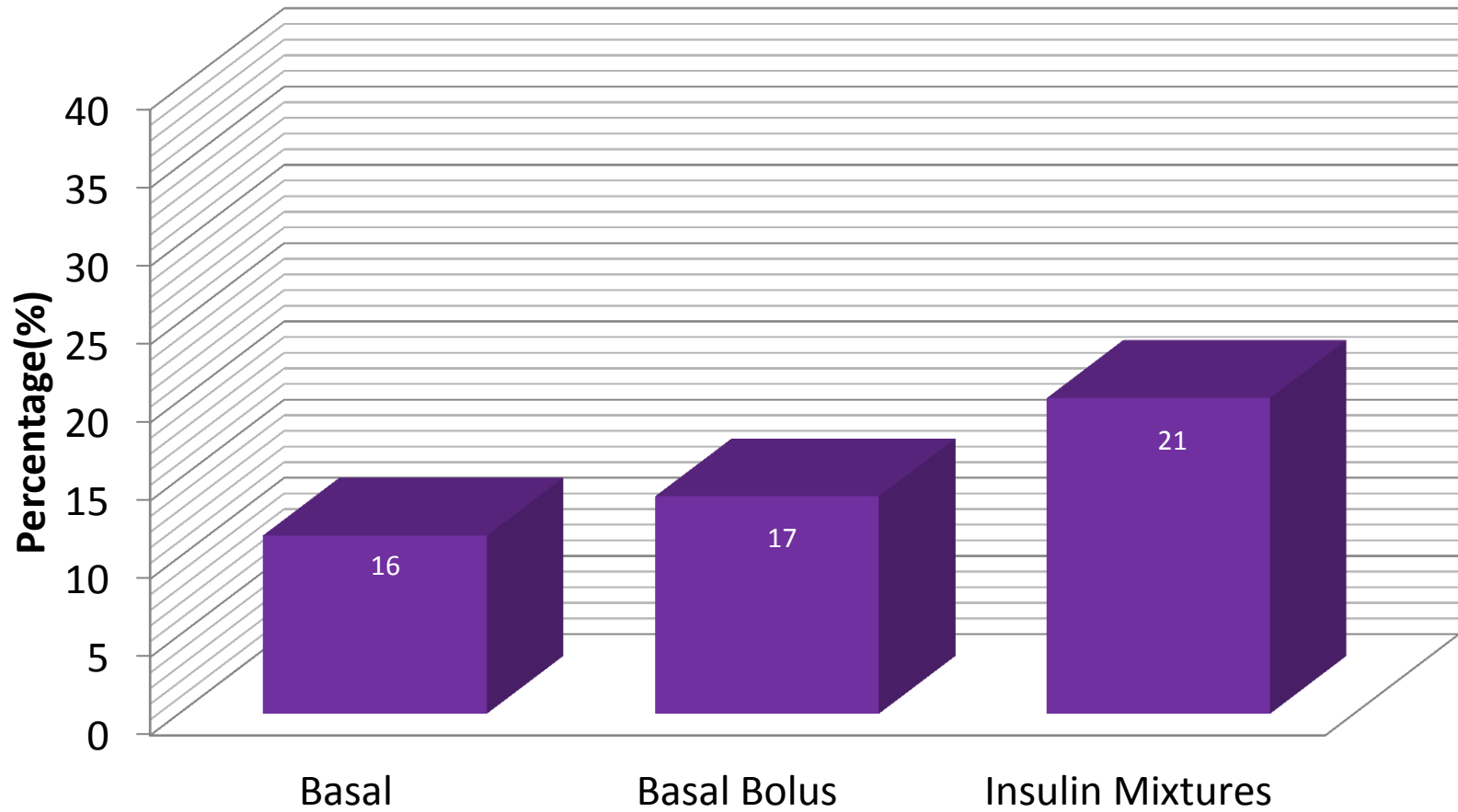
32.16

Reported as mean±SD or median(IQR)*

Medications



Insulin



Inclusion Criteria

n=556

Median = 26 weeks

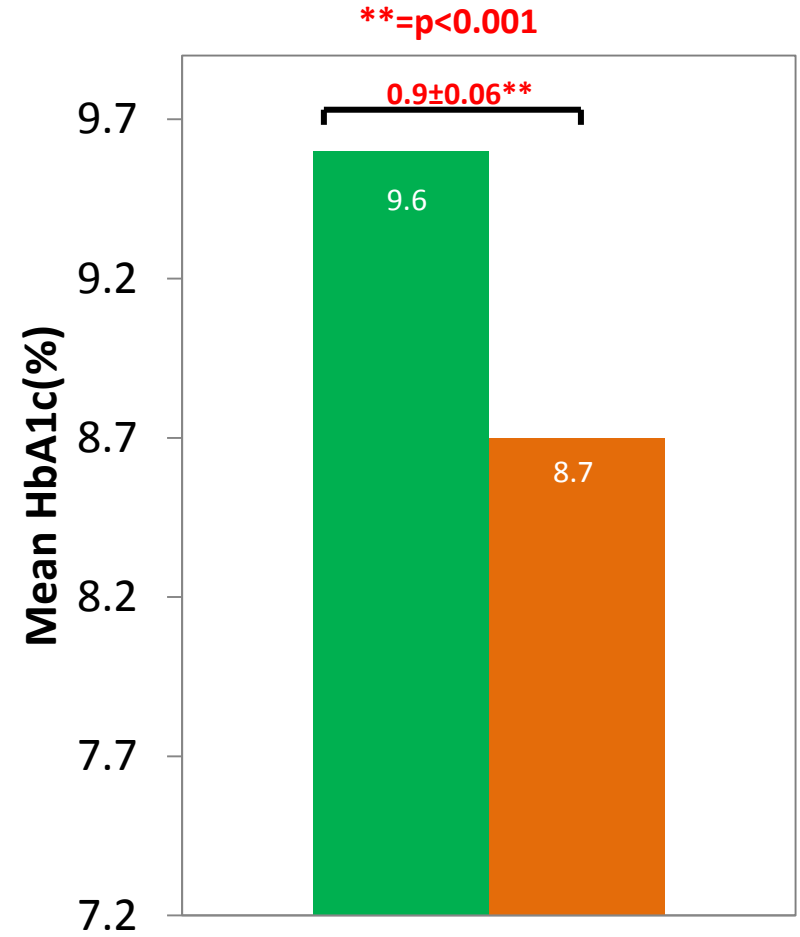
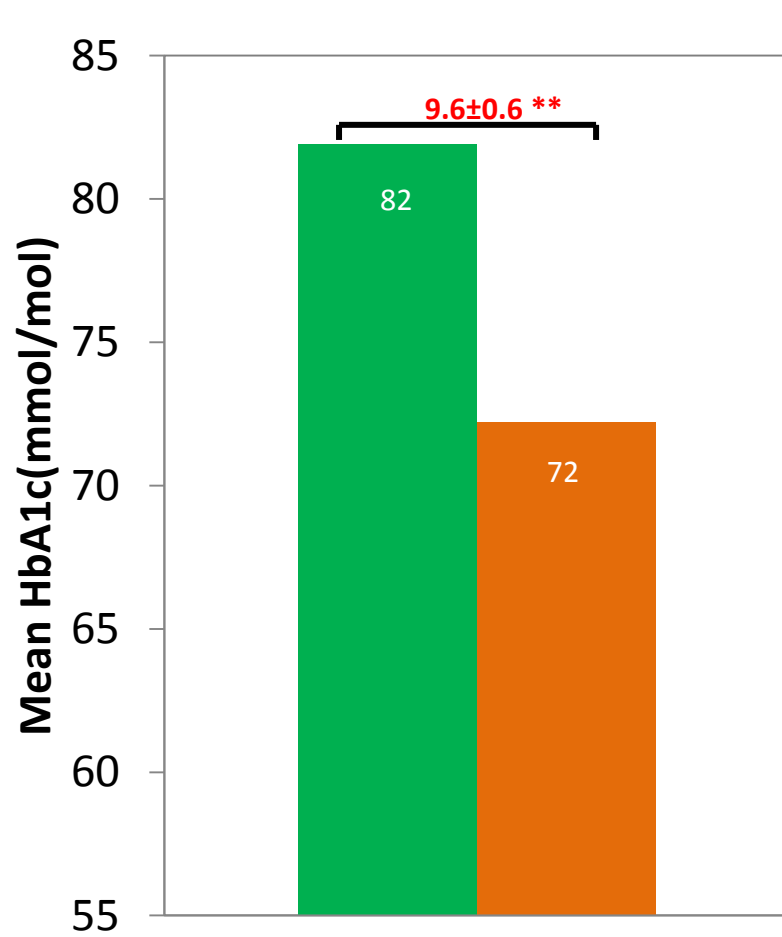
Baseline

+

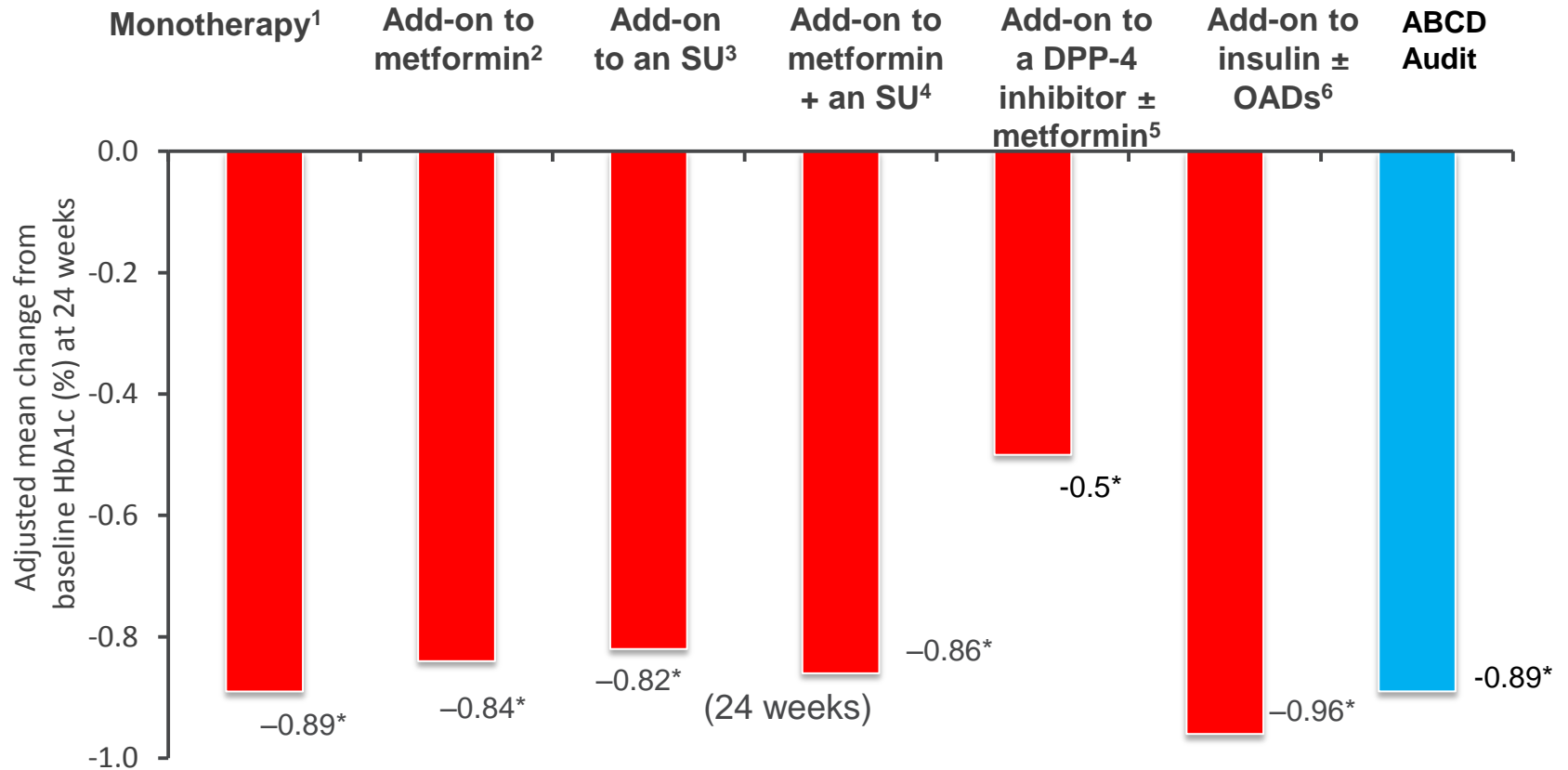
Follow up

n=943

HbA1c Response to Dapagliflozin (n=556)



Reductions in HbA_{1c} as Monotherapy and as Add-on



Baseline HbA_{1c}

8.01%

7.92%

8.07%

8.08%

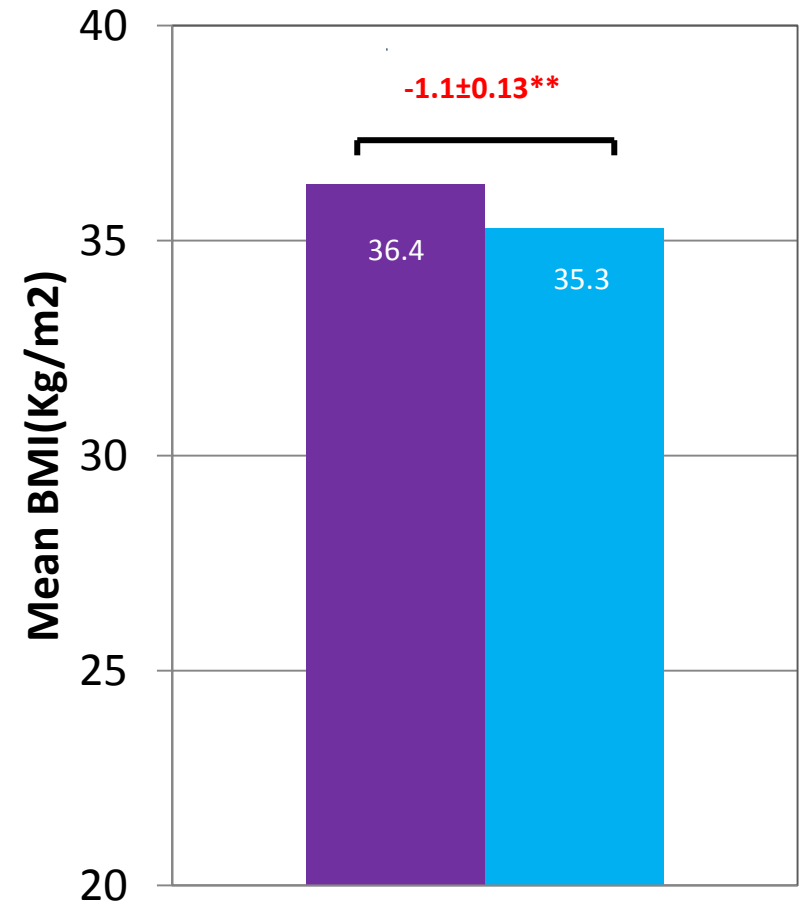
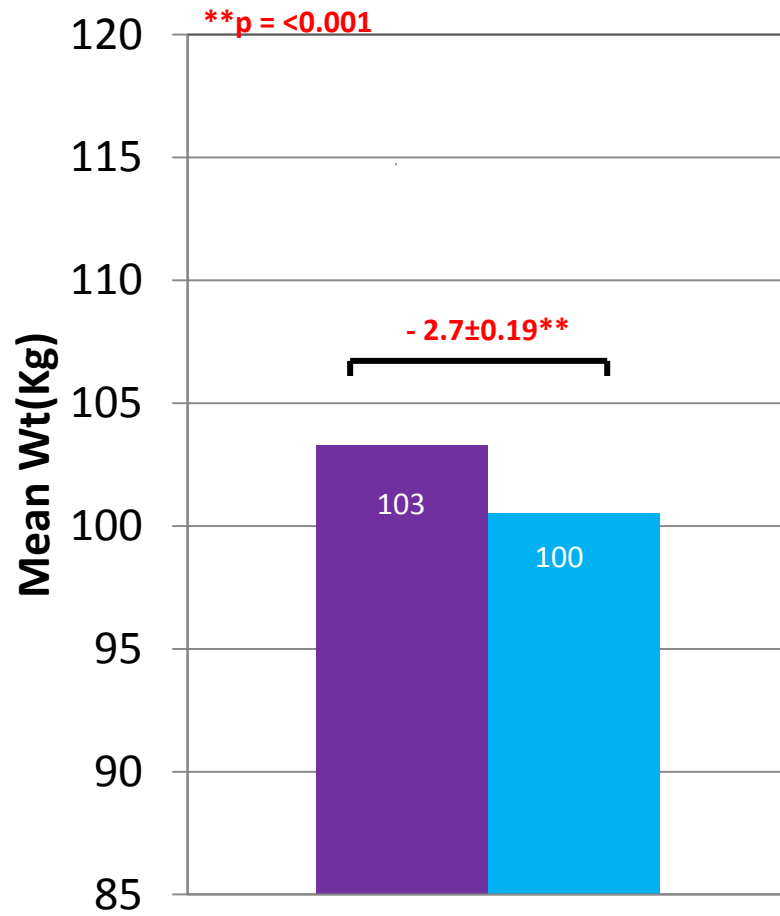
7.9%

8.57%

9.5%

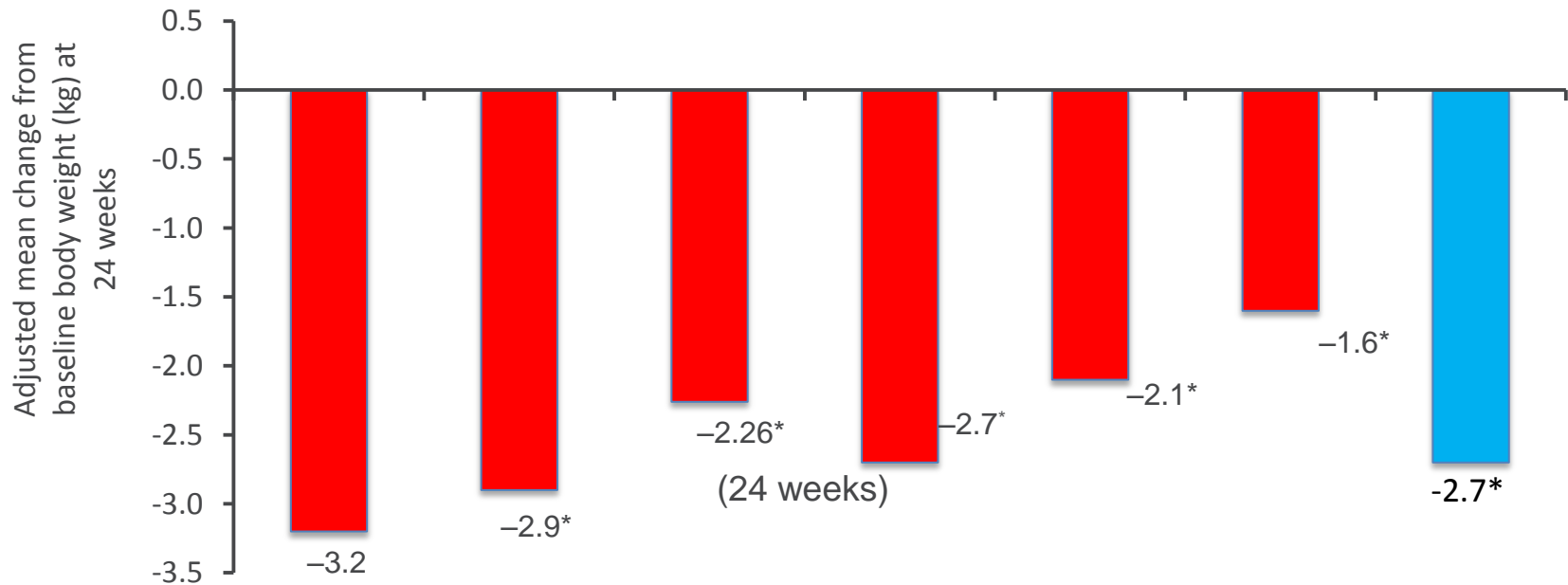
1. Ferrannini E et al (2010) *Diabetes Care* **33**: 2217–24; 2. Bailey CJ et al (2010) *Lancet* **375**: 2223–33; 3. Strojek K et al (2011) *Diabetes Obes J* **9**: 928–38; 4. Matthaie S et al (2015) *Diabetes Care* **38**: 365–72; 5. Jabbour SA et al (2014) *Diabetes Care* **37**: 740–50; 6. Wilding JPH et al (2012) *Ann N Y Acad Sci* **1263**: 105–15

Weight & BMI Response to Dapagliflozin(n=565)



Weight loss as Monotherapy and as Add-on

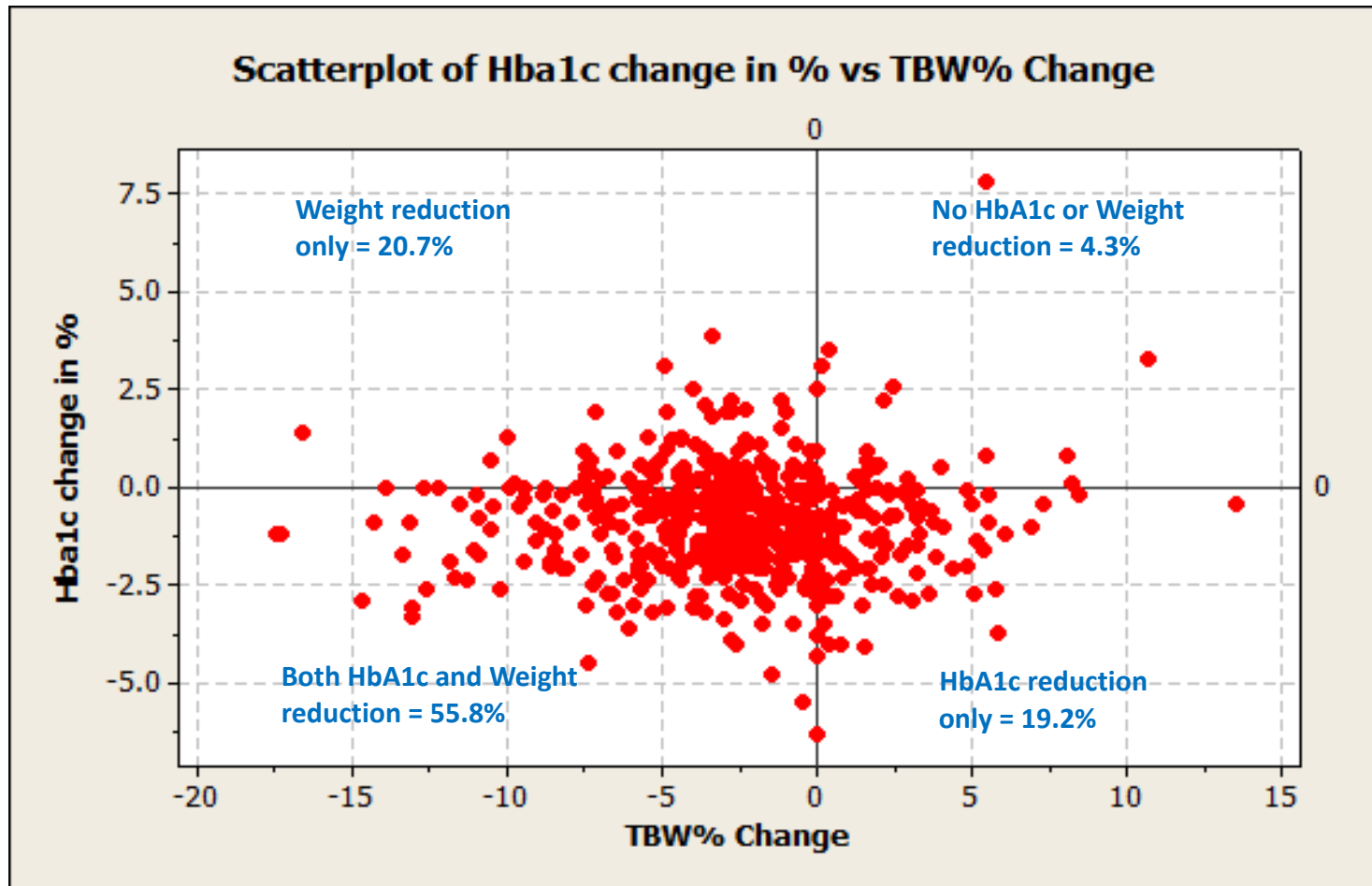
Monotherapy¹ **Add-on to metformin²** **Add-on to an SU³** **Add-on to metformin + an SU⁴** **Add-on to a DPP-4 inhibitor ± metformin⁵** **Add-on to insulin ± OADs⁶** **ABCD Audit**



Baseline weight (kg) 94.2 86.3 80.6 88.6 91.0 94.5 94.5

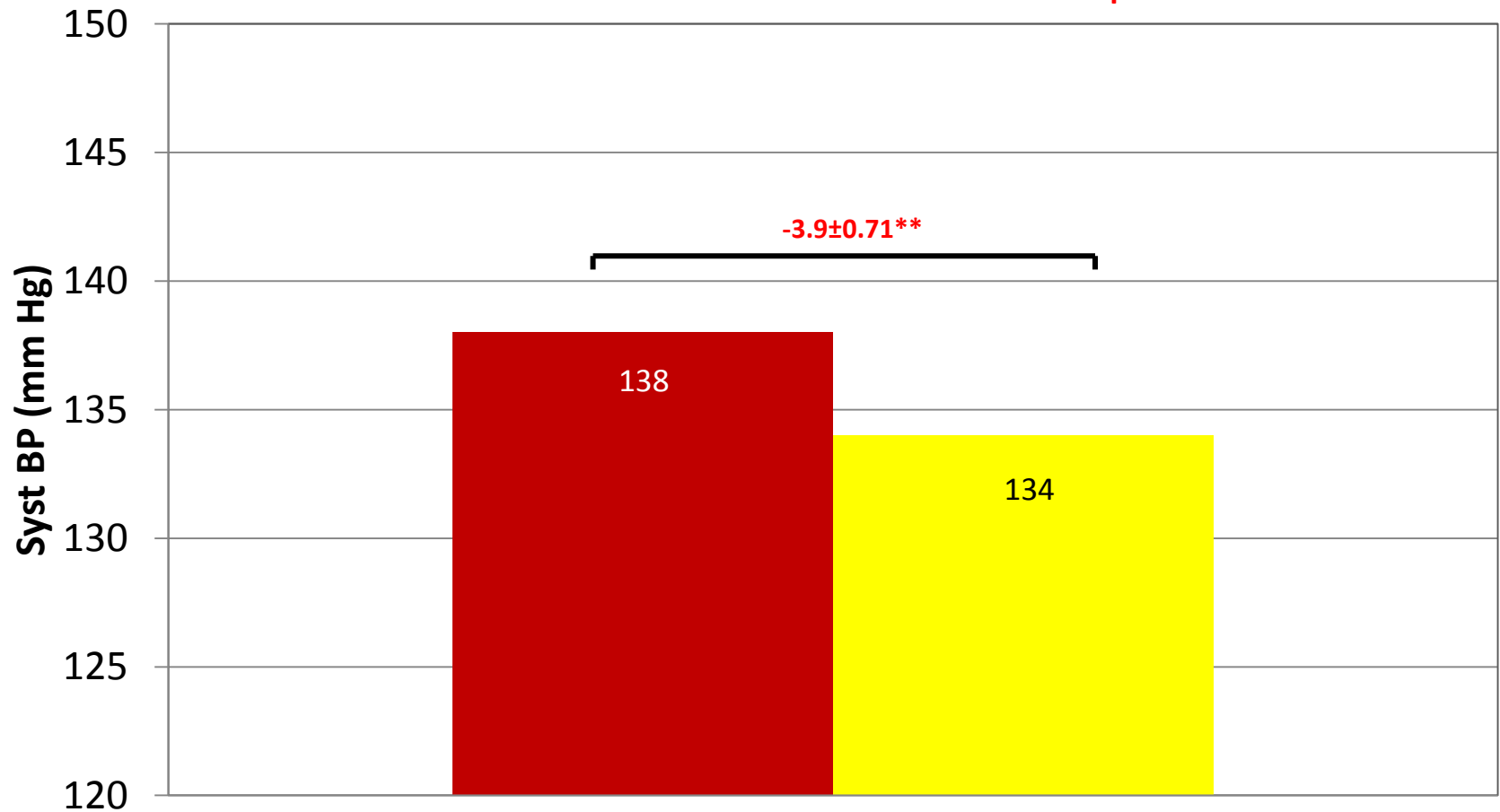
1. Ferrannini E et al (2010) *Diabetes Care* **33**: 2217–24; 2. Bailey CJ et al (2010) *Lancet* **375**: 2223–33; 3. Strojek K et al (2011) *Diabetes Obes Metab* **13**: 928–38; 4. Matthaai S et al (2015) *Diabetes Care* **38**: 365–72; 5. Jabbour SA et al (2014) *Diabetes Care* **37**: 740–50; 6. Wilding JPH et al (2012) *Ann Intern Med* **156**: 405–15;

HbA1c and Weight Data

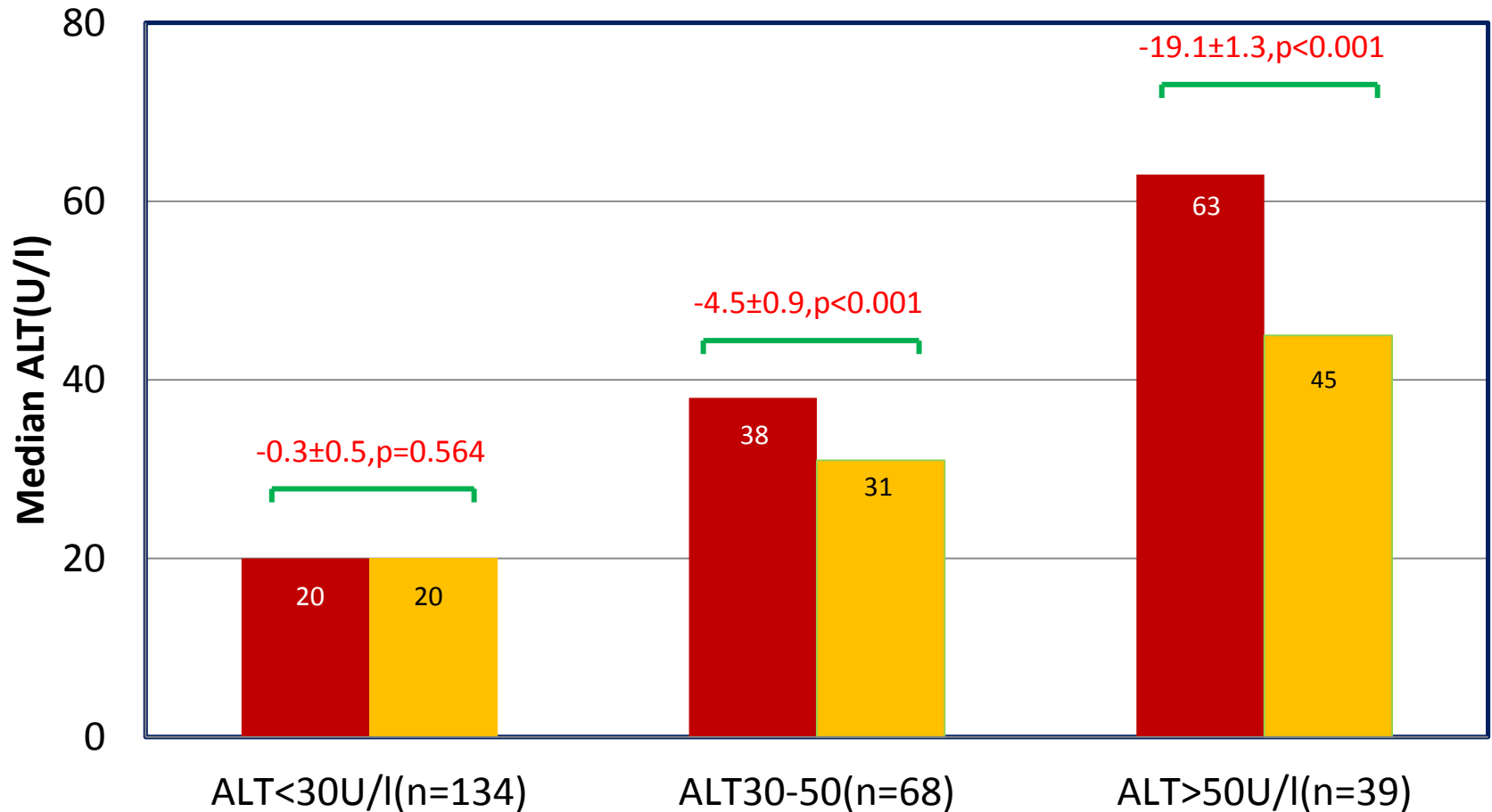


Systolic Blood Pressure Response to Dapagliflozin(n=519)

** = p<0.001



ALT response to Dapagliflozin



Conclusion

- Patients in the ABCD audit much heavier and with much more poorer glycaemic control than in the clinical trials
- Clinically significant reductions in HbA1c, weight, BMI and systolic blood pressure following dapagliflozin in real clinical use
- Early days of audit – there may be further reductions as data is gathered from longer use
- Clinically significant reductions in ALT following dapagliflozin in patients with high baseline ALT > 30U/l - may have implications regarding non-alcoholic fatty liver disease

ABCD nationwide dapagliflozin audit contributors

The following are those whom we know about.

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