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Problems with the NICE guideline for exenatide exposed in the Association of British Clinical Diabetologists (ABCD) nationwide exenatide audit

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**Introduction**

According to NICE, exenatide use:

- should be restricted to BMI  $\geq$  35.0 kg/m<sup>2</sup> and HbA1c  $\geq$  7.5% and patients not on insulin
- should only be continued if both HbA1c and weight at 6 months have reduced by at least 1% and 3% of initial body weight respectively

**Methods**

In the ABCD nationwide exenatide audit, 315 contributors from 126 centres submitted data on 6717 patients. Patients with HbA1c and weight data at both baseline and 6 months were analysed to compare reality with NICE recommendations. Analyses: 1) all such patients; 2) exclude patients with BMI <35kg/m<sup>2</sup> unless there would be a professional hazard using insulin, HbA1c<7.5% or on triple oral therapy or on insulin.

**Results**

Analysis 1: 1882 patients. Over 6 months mean HbA1c and weight fell ( $p < 0.001$ ) by 0.78% from 9.47% to 8.69% and by 6.6 kg from 114.2 to 107.6 kg respectively. 68.2% had HbA1c reduction, 89.2% had a weight reduction and 60.1% had a reduction in both. With regard to the NICE criteria for success 67.9% achieved the weight loss criteria, 44.9% achieved the HbA1c criteria but only 28.6% achieved both.

Analysis 2: 1081 patients. Over 6 months mean HbA1c and weight fell ( $p < 0.001$ ) by 0.96% from 9.73% to 8.76% and by 6.8 kg from 117.1 to 110.4 kg respectively. 72.1% had HbA1c reduction, 88.6% had a weight reduction and 63.4% had a reduction in both. With regard to the NICE criteria for success 66.9% achieved the weight loss criteria, 51.8% achieved the HbA1c criteria but only 32.9% achieved both.

There were many patients who achieved a substantial reduction in HbA1c but not weight and vice versa.

**Conclusion**

On exenatide in real clinical practice:

- Over 60% of patients achieve the ideal of both weight loss and fall in HbA1c
- However many patients experience a predominant response to only one of weight or HbA1c with more minimal response to the other
- Hence only about 30% achieve the NICE guideline standard

The NICE guideline should change to acknowledge that either significant weight loss or significant HbA1c response may represent a beneficial response