Type 2 Medications

Drug Class	How It Works	Brand and Generic Names	Manufacturers	Usual Starting Dose		Max Daily Dose	Side Effects and Special Considerations
SODIUM GLUCOSE CO-TRANSPORTER-2 (SGLT2) INHIBITOR	The kidneys filter sugar and either absorb it back into your body for energy or remove it through your urine. When blood sugar levels reach a certain point and the body has more than it needs, the kidneys help get rid of some of the sugar naturally, through the urine. In people with type 2 diabetes, this may not happen until blood sugar levels reach a higher point. As blood sugar levels climb, the kidneys and the body may hold on to more sugar instead of getting rid of it. FARXIGA works with your kidneys to remove some sugar in the urine when your body has more than it needs.	 **Farxiga®** (dapagliflozin)	**AstraZeneca**	The recommended dose of 5 mg once daily, taken in the morning, with or without food.		10 mg once daily, taken in the morning, with or without food.	For more information, please see Full Prescribing Information, including Patient Information at: www.farxiga.com/
	JARDIANCE® works by blocking the reabsorption of glucose in the kidney, increasing glucose excretion an d lowering blood glucose levels in adults with T2D who have elevated blood glucose levels.	 **Jardiance®** (empagliflozin) tablets	**Boehringer Ingelheim and Eli Lilly and Company**	The recommended dose is 10 mg once daily, taken in the morning, with or without a meal.		25 mg once daily, with or without a meal.	For more information, please see Full Prescribing Information, including Patient Information at : www.jardiance.com/
	SYNJARDY® works by helping to control blood glucose in people with T2D. SYNJARDY removes excess glucose through the urine by blocking glucose re-absorption in the kidneys while lowering glucose production by the liver and its absorption in the intestine.	 **Synjardy®** (empagliflozin and metformin hydrochloride) tablets	**Boehringer Ingelheim and Eli Lilly and Company**	The recommended dose 5 mg empagliozin/500 mg metformin hydrochloride once daily, taken in the morning, with a meal.		12.5 mg empagliflozin/1000 mg metformin hydrochloride.	For more information, please see Full Prescribing Information, including Patient Information at: www.synjardy.com/
	INVOKANA® This class of diabetes drugs works by making the kidneys shunt some glucose to the urinary tract rather than returning it to the bloodstream.	 **Invokana®** (canagliflozin)	**Johnson & Johnson**	The recommended dose is 100 mg once daily, taken before the first meal of the day.		300 mg once daily, taken before the first meal of the day.	Because an SGLT-2 drug does not directly affect blood sugars levels, it is considered to present less of a risk of hypoglycemia. Many patients report some weight loss and reductions in blood pressure while using Invokana®. For more information go to: www.invokana.com
SENSITIZERS	BIGUANIDES: These two drugs work by decreasing the liver's glucose production.	**Glucophage*** (metformin)	**Sun Pharma**	The recommended starting dose is one 500 mg tablet, taken with both the morning and evening meals, or one 850 mg tablet taken once a day, with a meal.		2550 mg once daily, with evening meal.	For more information, please see Full Prescribing Information, including Patient Information at: www.riomet.com
		 **Glucophage XR*** Extended-release tablets (metformin)	**Sun Pharma**	The recommended starting dose is one 500 mg tablet, taken with both the morning and evening meals, or one 850 mg tablet taken once a day, with the morning meal.		2000 mg once daily, with evening meal.	
	CYCLOSET® **is a sympatholytic dopamine D2 receptor agonist.** The circadian peak of brain dopamine activity (upon daily waking) is abnormally diminished in insulin resistant states such as type 2 diabetes and results in a chronic increase in sympathetic nervous system activity which in turn causes fasting and (especially) post-meal hyperglycemia. Morning Cycloset administration counters this abnormally diminished dopamine activity and thus reduces elevated sympathetic nervous system activity thereby improving insulin resistance and post-meal hyperglycemia.	**Cycloset** (bromocryptine mesylate) 	**VeroScience and Salix**	Once-daily 0.8 mg tablet taken with food ONLY within two hours after waking in the morning.		Maximum tolerated dose between 1.6 and 4.8 mg achieved over six-week titration period.	Possible gastrointestinal distress. Possible user hypotension and dizziness when rising from a sitting position. Possible somnolence. May exacerbate existing psychotic disorders. For more information go to: www.cycloset.com and www.veroscience.com

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STARCH BLOCKERS	**Alpha-Glucosidase Inhibitors:** These drugs work in the intestines to slow the digestion of some carbohydrates so that after-meal blood glucose peaks are not so high. 	**Precose®** (acarbose)	**Bayer**	The recommended dose is 25 mg (half a 50 mg tablet), taken orally three times a day at the start of each main meal.	150-300 mg per day (100 mg with each meal).		Abdominal pain, flatulence, and diarrhea tend to return to pretreatment levels as therapy continues. Take with the first bite of food for maximum effectiveness. Not approved for use during pregnancy or lactation. When these medications are used in combination with insulin, meglitinides, or sulfonylureas, hypoglycemia may occur and must be treated with pure glucose (tablets or gel) or milk because Precose and Glyset delay the absorption of other carbohydrates.
		Glyset® (miglitol)	**Pharmacia Upjohn**	The recommended dose is 25 mg to 50 mg taken with meals.	300 mg per day (100 mg with each meal).		
DPP-4 INHIBITORS	ONGLYZA® works by enhancing the body's natural ability to control blood sugar by helping increase the level of insulin after meals. This may result in lower after-meal blood sugar spikes. ONGLYZA also reduces the amount of sugar released by the liver overnight and between meals. This may result in lower blood sugar in the morning and between meals.	 **Onglyza®** (saxagliptin)	**AstraZeneca**	The recommended dose is 2.5 mg once daily, with or without a meal.	5 mg once daily, with or without a meal.		For more information, please see Full Prescribing Information, including Patient Information at https://www.onglyza.com/
	TRADJENTA® works by increasing hormones that stimulate your pancreas to produce more insulin and stimulate the liver to produce less glucose. 	**Tradjenta®** (linagliptin)	**Boehringer Ingelheim and Eli Lilly and Company**	The recommended dose is 5 mg once daily, with or without a meal.	5 mg once daily with or without a meal.		For more information, please see Full Prescribing Information, including Patient Information at https://www.tradjenta.com/
	JENTADUETO XR® works by increasing hormones that stimulate the pancreas to produce more insulin and the liver to produce less glucose. 	**Jentadueto® XR** (linagliptin and metformin hydrochloride extended-release) tablets	**Boehringer Ingelheim and Eli Lilly and Company**	The recommended dose is 2.5 mg once daily, with a meal.	5 mg and metformin hydrochloride 2000 mg once daily with a meal.		For more information, please see Full Prescribing Information, including Patient Information at https://www.jentadueto.com/
	These drugs enhance a natural body system called the incretin system, which helps to regulate glucose by affecting the beta cells and alpha cells in the pancreas. The mechanism of action of DPP-4 inhibitors is glucose-dependent, responding to the presence of elevated glucose and resulting in the release of insulin and decrease of glucagons only when needed, thereby lowering the potential for hypoglycemia.	**Januvia®** (sitagliptin)	**Merck**	The recommended dose is 50 mg once daily, with or without a meal.	100 mg once daily, with or without a meal.		For more information, please see Full Prescribing Information, including Patient Information at https://www.januvia.com/
	NESINA® (alogliptin) works by increasing pancreatic insulin production while also reducing glucose output by the liver.	**Nesina®** (alogliptin)	**Takeda**	25 mg orally once daily	25 mg		The dose of NESINA is 12.5 mg once daily for patients with moderate renal impairment (CrCl ≥30 to <60 mL/min). The dose of NESINA is 6.25 mg once daily for patients with severe renal impairment (CrCl ≥15 to <30 mL/min) or with end-stage renal disease (ESRD) (CrCl <15 mL/min or requiring hemodialysis). NESINA may be administered without regard to the timing of dialysis. NESINA has not been studied in patients undergoing peritoneal dialysis. Because there is a need for dose adjustment based upon renal function, assessment of renal function is recommended prior to initiation of NESINA therapy and periodically thereafter. For more information go to www.Nesina.com or call Takeda at 1-877-825-3327.
SGLT2/ DPP-4	GLYXAMBI® works by removing glucose through the urine by blocking blood glucose re-absorption in the kidney, while also increasing hormones that stimulate the pancreas to produce more insulin and stimulate the liver to produce less glucose.	**Glyxambi®** (empagliflozin/ linagliptin) tablet 	**Boehringer Ingelheim and Eli Lilly and Company**	The recommended dose is 10 mg empagliflozin/5 mg linagliptin once daily, in the morning, taken with or without a meal.	25 mg empagliflozin/5 mg linagliptin once daily, in the morning with or without a meal.		For more information, please see Full Prescribing Information, including Patient Information at https://www.glyxambi.com/

Type 2 Medications

Drug Class	How It Works	Brand and Generic Names	Manufacturers		Usual Starting Dose	Max Daily Dose	Side Effects and Special Considerations
GLP-1 RECEPTOR AGONIST	BYDUREON® is a once-weekly, non-insulin injection medicine that may help improve blood sugar in adults with type 2 diabetes. BYDUREON should be used along with diet and exercise and any oral medication currently being taken. BYDUREON is not recommended as the first medication to treat diabetes. BYDUREON works in the body to: • Help the pancreas release insulin when needed • Prevent the release of sugar when it's not needed • Slow down how quickly the stomach digests food, to send sugar into the blood more slowly • Help reduce the amount of food intake (BYDUREON is not a weight-loss drug. Individual results may vary.)	**Bydureon®** (exenatide extended-release) for injectable suspension)	 **AstraZeneca Pharmaceuticals LP**		Administer 2 mg by subcutaneous injection once every seven days (weekly), at any time of day and with or without meals. 	2 mg once every seven days.	For more information, please see Full Prescribing Information, including Patient Informati on at: www.bydureon.com/home.html
	BYETTA® is an injectable prescription medicine that may improve blood sugar (glucose) control in adults with type 2 diabetes, when used with diet and exercise. BYETTA is not insulin and should not be taken instead of insulin. BYETTA can be used with Lantus® (insulin glargine), which is a long-acting insulin, but should not be taken with short- and/or rapid-acting insulin. BYETTA should not be used in people with type 1 diabetes or people with diabetic ketoacidosis (a condition caused by very high blood sugar). BYETTA is not recommended for use in children. BYETTA has not been studied in people who have pancreatitis. BYETTA should not be used in people who have severe kidney problems.	**Byetta®**	**AstraZeneca Pharmaceuticals LP** 		In patients inadequately controlled on less than 30 units of basal insulin or on lixisenatide, the recommended starting dosage of SOLIQUA 100/33 is 15 units (15 units insulin glargine/5 mcg lixisenatide) given subcutaneously once daily. In patients inadequately controlled on 30 to 60 units of basal insulin, the recommended starting dosage of SOLIQUA 100/33 is 30 units (30 units insulin glargine/10 mcg lixisenatide) given subcutaneously once daily. See Table 1 in the full prescribing information.	10 micrograms/twice a day.	For more information, please see Full Prescribing Information, including Patient Information at: www.byetta.com/
	TRULICITY® is a once-weekly injectable prescription medicine to improve blood sugar in adults with type 2 diabetes. It should be used along with diet and exercise.	**Trulicity®** (dulaglutide)	**Eli Lilly and Company**		Trulicity comes in two doses - one with a yellow label (0.75 mg), the other with a blue label (1.5 mg). Recommended starting dose is 0.75 mg. Dose may be increased to 1.5 mg for additional glycemic control.	Trulicity is a once-weekly dose.	For more information, please see Full Prescribing Information, including Patient Information at: www.trulicity.com/
	OZEMPIC® A GLP-1 receptor agonist works to help the pancreas release more insulin and slow down the digestive process to help the body better metabolize food intake.	**Ozempic®** (semaglutide)	**Novo Nordisk**		.25mg once weekly injection.	1mg once weekly injection.	For more details go to: www.ozempic.com
	VICTOZA® is an injectable type 2 diabetes medication. However, it is not insulin and does not contain insulin. Victoza has been studied in combination with basal insulin. It has not been studied in combination with prandial insulin. It can be taken with other diabetes medications, including metformin, sulfonylureas, and basal insulin and TZDs under a doctor's prescription. Victoza® is 97 percent similar to a hormone made in the body called glucagon-like peptide-1, or GLP-1. When a person eats, GLP-1 helps the beta cells in the pancreas release the right amount of insulin to move sugar from the blood into the cells. Victoza® has the same effect and also helps slow down the time it takes for food to leave the stomach, which can help the body manage its blood sugar level. Victoza® also prevents the liver from releasing too much sugar by lowering the amount of another hormone, glucagon.	**Victoza®** (liraglutide [rDNA origin]injection)	 **Novo Nordisk**  VICTOZA®		For all patients, Victoza® should be initated with a dose of 0.6mg per day for one week. The 0.6mg dose is a starting dose intended to reduce gastrointestinal symptoms during inital titration, and is not effective for glycemic control. After one week at 0.6mg per day, the dose should be increased to 1.2mg. If the 1.2mg dose does not result in acceptable glycemic control, the dose can be increased to 1.8 mg.	1.8 mg daily.	For more information, please see Full Prescribing Information, including Patient Information at: www.victoza.com/
	Adlyxin® is an injectable prescription medicine that may improve blood sugar (glucose) control in adults with type 2 diabetes, when used with diet and exercise.	**Adlyxin®** (lixisenatide) injection	**Sanofi**		The starting dose of Adlyxin is 10 mcg subcutaneously once daily for 14 days. Increase the dose to the maintenance dose of 20 mcg once daily starting on Day 15.	N/A	For more information, please see Full Prescribing Information, including Patient Information at :www.products.sanofi.us/adlyxin/adlyxin.pdf
	SOLIQUA® 100/33® is a combination of a long-acting human insulin analog with a glucagon-like peptide-1 (GLP-1) receptor agonist indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus inadequa tely controlled on basal insulin (less than 60 units daily) or lixisenatide.	**Soliqua®**	**Sanofi** 		Soliqua 100/33 should be taken within an hour before the first meal of the day, administered with the SoloStar® pen. Starting dose is 15 units, titrated by 2 to 4 units weekly until desired FPG (fasting plasma glucose) is reached.	N/A	For more information, please see Full Prescribing Information, including Patient Information www.products.sanofi.us/Soliqua100-33/Soliqua100-33.pdf
AMYLIN MIMETIC	SYMLIN® is a synthetic analog of human amylin that can help lower blood sugar in adults with type 1 and type 2 diabetes treated with mealtime insulin. SYMLIN works in the body in three ways: • SYMLIN suppresses the release of glucagon, a hormone that tells your liver to release sugar into the bloodstream. • SYMLIN slows the rate food moves from the stomach into the small intestine. • SYMLIN makes you feel full at meals which makes you eat less (SYMLIN is not a weight-loss product. Individual results may vary).	**Symlin Pen™** (pramlintide acetate) pen-injector	**AstraZeneca Pharmaceuticals LP** 		The amount of Symlin used depends on whether the patient has type 1 or type 2 diabetes. When starting SYMLIN, the dose of Insulin should be reduced to half. Never mix SYMLIN and insulin. For type 2: Start SYMLIN at 60 mcg injected subcutaneously, just before major meals (meal must have at least 250 calories or 30 grams of carbohydrate). For type 1: Start SYMLIN at 15 mcg injected subcutaneously, just before major meals (meal must have at least 250 calories or 30 grams of carbohydrate).	Type 2: 120 mcg; Type 1: 60 mcg with meals.	For more information, please see Full Prescribing Information, including Patient Information at www.symlin.com/