

Early intensive diabetes therapy preserves beta-cell function

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(HealthDay) -- Early, intensive therapy for type 2 diabetes with either insulin plus metformin or triple oral therapy preserves β -cell function for at least 3.5 years, according to a study published in the July issue of *Diabetes Care*.

Lindsay B. Harrison, M.D., of the University of Texas Southwestern Medical Center in Dallas, and colleagues conducted a randomized trial involving 58 patients with treatment-naïve, newly diagnosed [type 2 diabetes](#). Participants were treated for three months with [insulin](#) and [metformin](#) and were then randomly allocated to continue with insulin plus metformin or to receive triple oral therapy with metformin, glyburide, and pioglitazone. A mixed meal challenge test was used to

assess β -cell function at randomization and six, 12, 18, 30, and 42 months.

After 3.5 years the researchers found that 83 percent of insulin plus metformin-treated patients and 72 percent of triple oral therapy patients completed the study, with good compliance noted in both groups. At 3.5 years after diagnosis, β -cell function was preserved between the groups, with no significant change from baseline or between-group difference (end of study hemoglobin A1c, 6.35 percent for insulin plus metformin versus 6.59 percent for triple oral therapy). In both groups there was an increase in weight, with no significant difference between the groups. Hypoglycemic episodes decreased over time for both groups and were not significantly different.

"Intensive insulin therapy at the time of diagnosis of type 2 [diabetes](#) followed by either an insulin-based regimen or multiple oral hypoglycemic agents preserves both glycemic control and β -cell function for at least 3.5 years with no significant difference in the adverse-effect profile," the authors write.

Several authors disclosed financial ties to pharmaceutical companies, including Novo Nordisk, which funded the study.

More information: [Abstract](#)
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