Medical Xpress

Reduced health care use for exenatide regimens in T2DM

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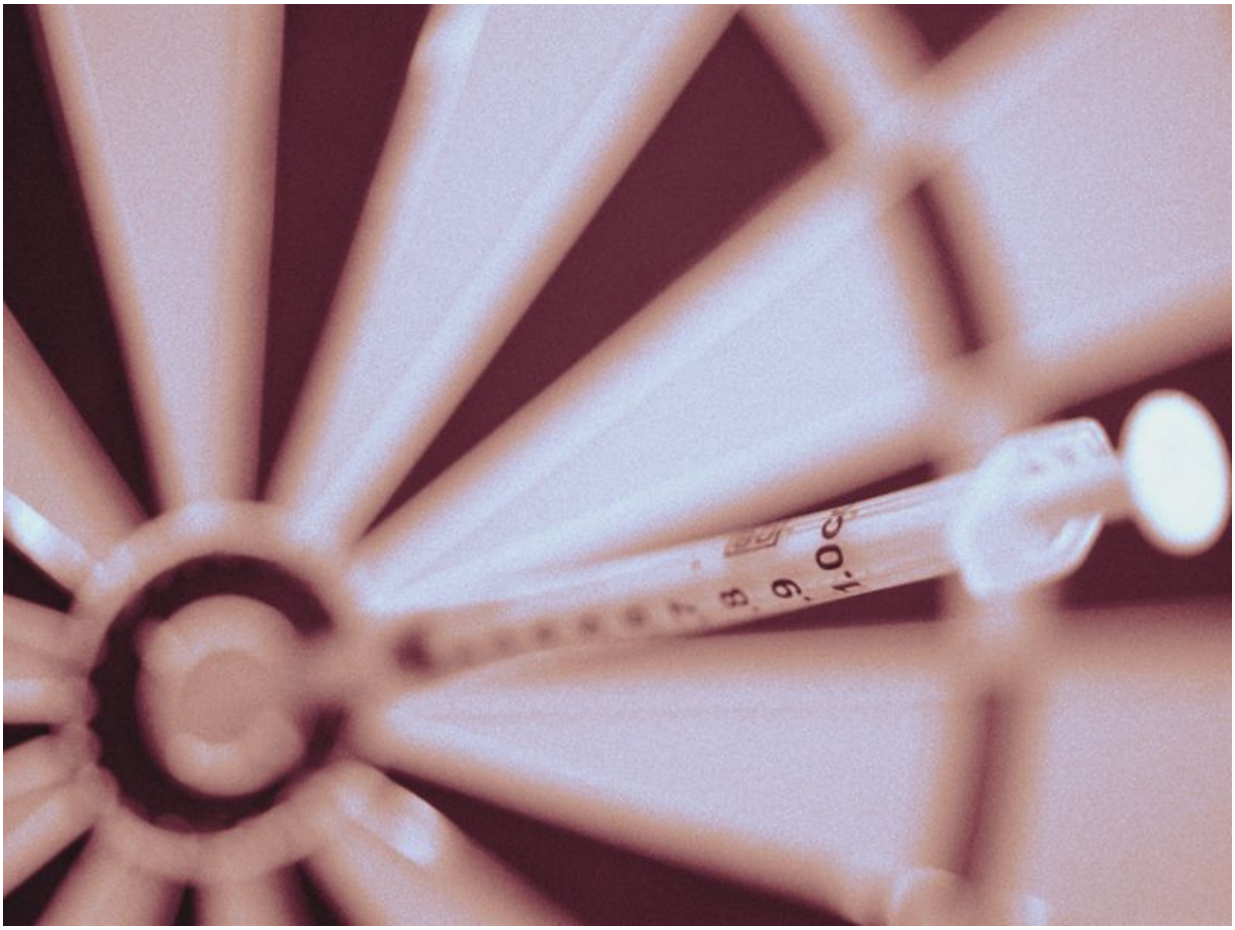

(HealthDay)—For patients with type 2 diabetes, treatment with

exenatide is associated with reduced health care resource use and costs compared with basal insulin (BI) regimens, according to a study published online Feb. 20 in *Diabetes, Obesity and Metabolism*.

In a retrospective cohort study, Sarah E. Holden, from Pharmatelligence in Cardiff, U.K., and colleagues estimated heath care resource use and related financial costs following exenatide-based regimens prescribed as once-weekly (EQW) or twice-daily (EBID) formulations versus BI regimens. Data were included for patients with type 2 diabetes prescribed exenatide or BI between 2009 and 2014 as their first recorded exposure to injectable therapy. A total of 8,723, 218, and 2,180 patients prescribed BI, EQW, and EBID, respectively, were included in the study. Overall, 188 patients prescribed EQW and 1,486 prescribed EBID were propensity score-matched to BI patients in a 1:1 ratio.

The researchers found that total crude mean costs per patient-year were £2,765, £2,549, and £4,080 for EQW, EBID, and BI, respectively, among unmatched cohorts. The adjusted annual cost ratio was 0.92 and 0.82 for EQW and EBID, respectively, compared with BI. For the propensity score-matched subgroups, the corresponding costs were £2,646 versus £3,283 for EQW versus BI and £2,532 versus £3,070 for EBID versus BI.

"Overall, treatment with EQW and EBID was associated with reduced health care resource use and costs compared with BI," the authors write.

Several authors disclosed financial ties to Pharmatelligence. One author is an employee of AstraZeneca, which commercializes exenatide and funded the study.

More information: Abstract
Full Text (subscription or payment may be required)