

# Timely augmentation to triple oral antihyperglycemic therapy

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The goal of the management of type 2 diabetes is to achieve and maintain blood glucose levels close to the normal range in order to delay or prevent the development of the long-term complications of the disease, such as myocardial infarction, stroke, vision loss and kidney failure. For most patients, the treatment goal is to keep the glycated hemoglobin (HbA1c)

A multicentre, randomized, controlled clinical trial that enrolled 5,535 type 2 diabetes patients from 237 centers across China shows that the addition of a third oral antihyperglycemic drug led to a further 0.59 percent HbA1c reduction and resulted in a 62.3 percent HbA1c target achievement rate for the entire study. Timely augmentation to triple oral antihyperglycemic therapy could provide a valid choice to overcome 'clinical inertia' and optimize [glycemic control](#) in type 2 diabetes.

Diabetes is a progressive disease, and most patients will eventually need to use multiple pharmacological agents in order to reach glycemic targets. In fact, major professional societies, including American Diabetes Association (ADA), the European Association for the Study of Diabetes (EASD) and Chinese Diabetes Society (CDS) strongly advocate a stepwise approach to glycemic control that starts with metformin and intensifies treatment incrementally to dual and triple therapy at three-month intervals until the patient is at their individualized goal. Despite the wide acceptance of the benefit associated with tight glucose control, less than 40 percent of type 2 diabetes patients worldwide are at the glycemic control target (HbA1c

Recently, Professor Jianping Weng from the Third Affiliated Hospital of Sun Yat-Sen University and co-investigators released the results of a large clinical trial aimed at exploring the potential of a variety of oral AHA as a third-line agent for type 2 diabetes. The study was conducted in 237 centers screening 7,880 type 2 diabetes patients across China. This is the first comparative effectiveness trial to evaluate the efficacy and safety of the addition of a third AHA to the metformin/ sitagliptin dual therapy. The trial had a two-phase sequential design, first evaluating the combined effect of metformin with sitagliptin. Those who did not achieve the glycemic control target (HbA1c

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