

Ipragliflozin beneficial in T2DM complicated by liver disease

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(HealthDay)—For patients with type 2 diabetes and nonalcoholic fatty

liver disease (NAFLD), ipragliflozin exerts beneficial effects on NAFLD and glycemic control, similar to pioglitazone, according to a study published online July 27 in *Diabetes Care*.

Daisuke Ito, M.D., from Saitama Medical University in Japan, and colleagues randomized 66 patients with type 2 diabetes and NAFLD to receive ipragliflozin 50 mg or pioglitazone 15 to 30 mg orally once daily (32 and 34 participants, respectively). The authors examined the change from baseline in the liver-to-spleen attenuation ratio (L/S ratio) on computed tomography at week 24 as the primary outcome.

The researchers found that there was an increase in the mean L/S ratio by 0.22 in the ipragliflozin group and by 0.21 in the pioglitazone group ($P = 0.90$) at week 24. The two treatment groups had similar reductions in serum aspartate and alanine aminotransferase levels, hemoglobin A1c, and fasting plasma glucose. Significant reductions were seen in [body weight](#) and visceral fat area in the ipragliflozin group only, compared with the pioglitazone group (P

"Compared with pioglitazone, ipragliflozin exerts equally [beneficial effects](#) on NAFLD and [glycemic control](#) during the treatment of patients with type 2 diabetes complicated by NAFLD," the authors write.

"Furthermore, ipragliflozin significantly reduced body weight and abdominal fat area."

Several authors disclosed financial ties to pharmaceutical companies, including Astellas, a co-developer of ipragliflozin.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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