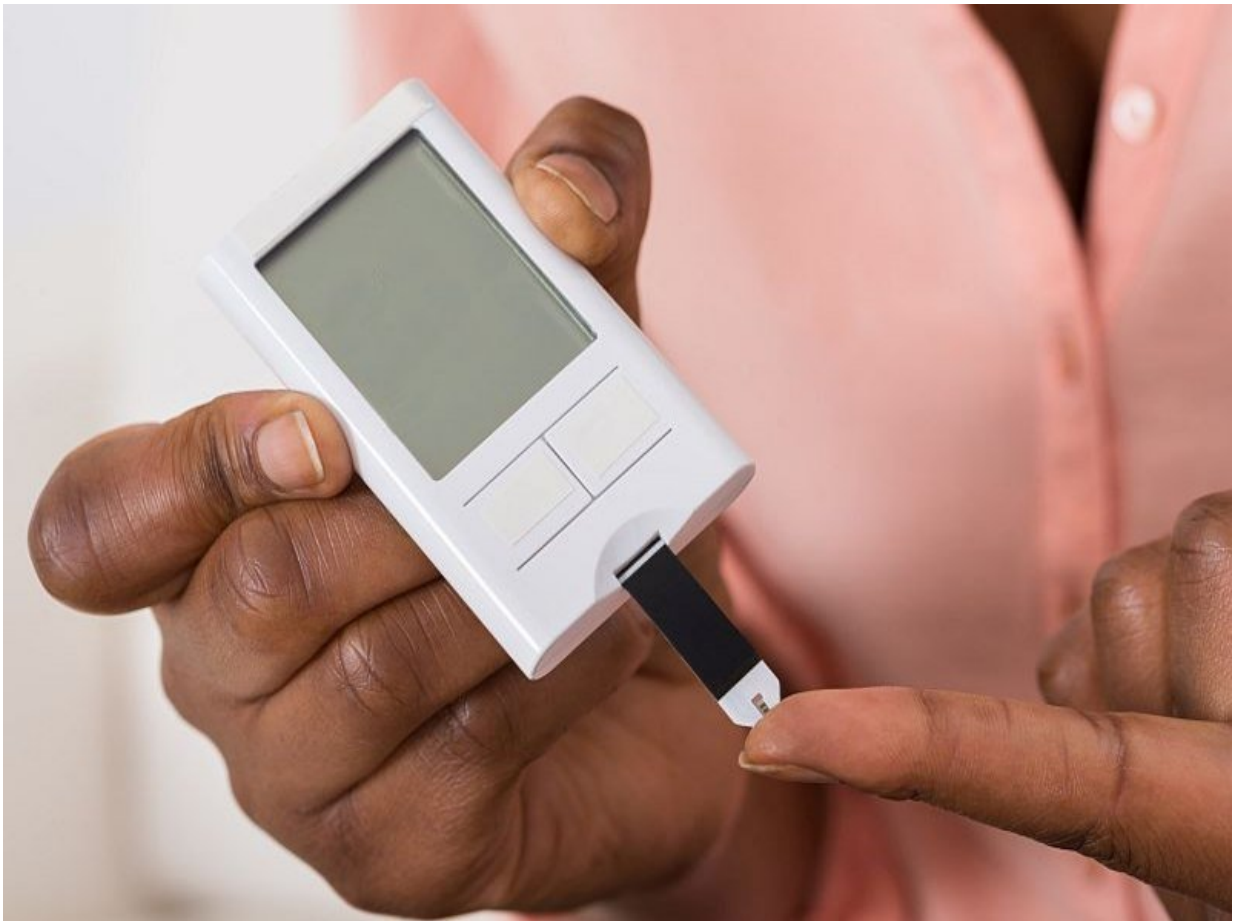


Fat intake influences HbA1c-lowering effect in DPP4i therapy

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(HealthDay)—For individuals with type 2 diabetes (T2D), fat intake

may contribute to the deterioration of the hemoglobin A1c (HbA1c)-lowering effects in dipeptidyl peptidase-4 inhibitor (DPP4i) monotherapy, according to a study published online Nov. 24 in the *Journal of Diabetes Investigation*.

Hitoshi Kuwata, M.D., Ph.D., from the Kansai Electric Power Medical Research Institute in Kobe, Japan, and colleagues examined the correlation between deterioration of the HbA1c-lowering effects in DPP4i monotherapy and macronutrient intake among [individuals](#) with T2D. Participants who began and continued DPP4i monotherapy without any prescription change for one year were classified as patients who maintained their HbA1c levels during the 0.5- to one-year period after DPP4i initiation (Group A, Δ HbA1c

The researchers found that Group B had significantly higher Δ HbA1c, Δ body weight, and [fat intake](#), especially saturated and monounsaturated fats. Intakes of carbohydrates and proteins were similar between the groups. There was a significant correlation for fat intake, especially saturated fat intake, with Δ HbA1c in multiple regression analyses.

"Dietary habits, especially saturated fat intake, might well contribute to deterioration of the HbA1c-lowering effects in DPP4i monotherapy," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)
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