

Linagliptin noninferior for CV risk in early type 2 diabetes

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(HealthDay)—Linagliptin is noninferior to glimepiride for adults with

relatively early type 2 diabetes and elevated cardiovascular risk, according to a study published online Sept. 19 in the *Journal of the American Medical Association* to coincide with the annual meeting of the European Association for the Study of Diabetes, held from Sept. 16 to 20 in Barcelona, Spain.

Julio Rosenstock, M.D., from the Dallas Diabetes Research Center at Medical City, and colleagues examined cardiovascular outcomes of linagliptin versus glimepiride (sulfonylurea) in 6,042 adults with type 2 diabetes, glycated hemoglobin of 6.5 to 8.5 percent, and elevated [cardiovascular risk](#). Patients were followed for a median of 6.3 years.

The researchers found that the primary outcome (time to first occurrence of cardiovascular death, nonfatal myocardial infarction, or nonfatal stroke) occurred in 11.8 and 12.0 percent of patients in the linagliptin and glimepiride groups, respectively (hazard ratio, 0.98; 95.47 percent confidence interval, 0.84 to 1.14; P

"The current study demonstrates noninferior cardiovascular safety effects for linagliptin versus glimepiride when used predominantly as a second-line glucose-lowering [treatment option](#) after metformin," the authors write.

Several authors disclosed financial ties to [pharmaceutical companies](#), including Boehringer Ingelheim, which manufactures [linagliptin](#) and funded the study.

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