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Durable Effects of iGlarLixi Up to 52 Weeks in Type 2 Diabetes: The LixiLan-G

Extension Study.

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OBJECTIVE: In the LixiLan-G trial, switching to iGlarLixi, a once-daily

titratable fixed-ratio combination of insulin glargine 100 units/mL and the

glucagon-like peptide 1 receptor agonist (GLP-1 RA) lixisenatide, improved

glucose control in type 2 diabetes uncontrolled with GLP-1 RAs over 26 weeks

versus continuing prior GLP-1 RA. A prespecified, 26-week, single-arm extension

of LixiLan-G aimed to determine the durability of iGlarLixi efficacy and safety

over 52 weeks.

RESEARCH DESIGN AND METHODS: Participants with type 2 diabetes uncontrolled by

GLP-1 RAs (glycated hemoglobin [HbA1c] 7-9% [53-75 mmol/mol]) were initially

randomized to switch to iGlarLixi or continue prior GLP-1 RA. Those randomized

to iGlarLixi who completed the 26-week primary end point period could continue

iGlarLixi open-label treatment over a 26-week extension to assess durability of

efficacy and safety.

RESULTS: Glycemic control achieved with iGlarLixi at week 26 (mean HbA1c 6.7%

[50 mmol/mol]) was maintained at week 52 (mean HbA1c 6.7% [50 mmol/mol]; mean Â±

SD change from baseline at week 52: -1.0 Â± 0.9% [11 Â± 10 mmol/mol]). Proportions

of participants reaching HbA1c <7% (53 mmol/mol) with iGlarLixi were similar at

week 26 (62%) and 52 (64%), as were those reaching this target without

documented symptomatic (<3.0 mmol/L) hypoglycemia (57% and 58%). Safety of

iGlarLixi was similar at weeks 26 and 52, with low rates of documented

symptomatic hypoglycemia and gastrointestinal events.

CONCLUSIONS: The efficacy and safety of iGlarLixi at the end of the 26-week

randomized treatment period was maintained over the 26-week extension period in

the LixiLan-G trial.

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