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VIDEO ROUNDTABLE

ABSTRACT

Safe and Appropriate Use of GLP-1 RAs in Treating Adult Patients With Type 2 Diabetes and Macrovascular Disease

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Macrovascular complications, particularly cardiovascular disease (CVD), are the greatest contributors to the morbidity, mortality, and cost of diabetes mellitus. Atherosclerotic cardiovascular disease (ASCVD) is the most important macrovascular complication, and type 2 diabetes (T2D) and its associated hyperglycemia are major risk factors for ASCVD. Some antihyperglycemic therapies for T2D, including some sodium-glucose cotransporter-2 inhibitors, thiazolidinediones, and glucagon-like peptide-1 receptor agonists (GLP-1 RAs) have demonstrated benefit in CVD and chronic kidney disease (CKD).

GLP-1, a potent incretin hormone, enhances insulin and inhibits glucagon secretion in a glucose-dependent manner; it also inhibits gastric emptying and gastric acid secretion and increases satiety. GLP-1 RAs mimic endogenous GLP-1 but have a longer half-life. In addition to lowering glucose levels, some GLP-1 RAs have demonstrated the ability to reduce the risk of CVD events. GLP-1 RAs have also been shown to decrease the progression of CKD and to help manage obesity and nonalcoholic steatohepatitis. Adverse events related to GLP-1 RAs include gastrointestinal issues such as nausea, vomiting, diarrhea, and abdominal pain and discomfort.

The roundtable videos in this supplement, developed for primary care clinicians, aim to review the mechanisms of action, clinical trial data, and real-world evidence for the use of GLP-1 RAs in the safe and effective care of individuals with T2D and macrovascular disease. ●

VIDEO

The video roundtable associated with this abstract can be found online at https://www.mdedge.com/JFP/macrovascular-disease

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DISCLOSURES

James LaSalle, DO, has disclosed the following relevant financial relationships: Consultant and member of the speakers bureau for Novo Nordisk Inc.

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