

Weight Change

Metformin



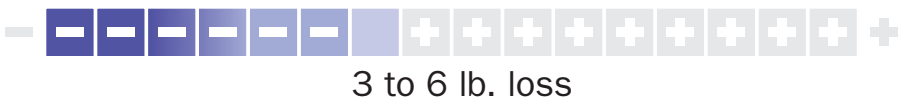
Insulin



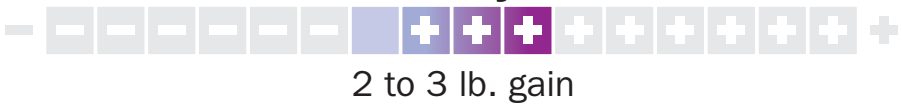
Glitazones



Exenatide



Sulfonylureas



Gliptins



Low Blood Sugar

(Hypoglycemia)

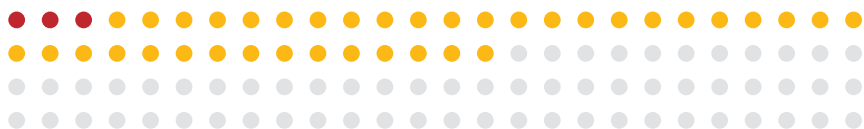
Metformin



No Severe Risk

● Minor = 0 – 1%

Insulin



● Severe = 1 – 3%

(of those who experience minor hypoglycemia)

● Minor = 30 – 40%

Glitazones



No Severe Risk

● Minor = 1 – 2%

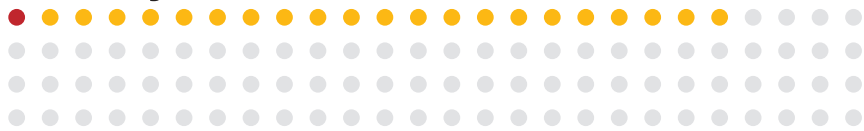
Exenatide



No Severe Risk

● Minor = 0 – 1%

Sulfonylureas

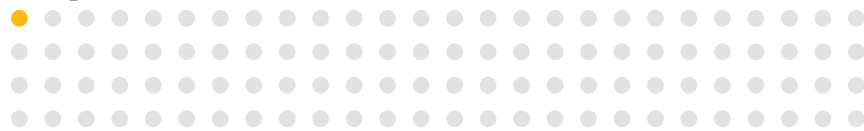


● Severe = Less than 1%

(of those who experience minor hypoglycemia)

● Minor = 21%

Gliptins



No Severe Risk

● Minor = 0 – 1%

Blood Sugar

(A1c Reduction)

Metformin 1 – 2%

Insulin Unlimited %

Glitazones 1%

Exenatide ½ – 1%

Sulfonylureas 1 – 2%

Gliptins 0.5 – 1%

Side Effects

Metformin

In the first few weeks after starting Metformin, patients may have some **nausea, indigestion** or **diarrhea**.

Insulin

There are no other side effects associated with Insulin.

Glitazones

Over time, 10 in 100 people may have **fluid retention (edema)** while taking Glitazones. For some, it may be as little as ankle swelling. For others, fluid may build up in the lungs making it difficult to breathe. This may resolve after you stop taking the drug.

Exenatide

After starting Exenatide, some patients may have **nausea** or **diarrhea**. In some cases, the nausea may be severe enough that a patient has to stop taking the drug.

Sulfonylureas

Some patients get **nausea, rash** and/or **diarrhea** when they first start taking Sulfonylureas. This type of reaction may force them to stop taking the drug.

Gliptins

A few patients may get nose and sinus congestion and headaches.

Daily Routine

Metformin



Insulin



Glitazones



Exenatide

Take in the hour
before meals.



Sulfonylureas

Take 30 min. before meal.



Gliptins



Daily Sugar Testing

(Monitoring)

Metformin

S	M	T	W	T	F	S
	•		•		•	

Monitor 2 - 5 times weekly, less often once stable.

Insulin

S	M	T	W	T	F	S
••	••	••	••	••	••	••

Monitor once or twice daily, less often once stable.

Glitazones

S	M	T	W	T	F	S
•		•		•		•

Monitor 3 - 5 times weekly, less often once stable.

Exenatide

S	M	T	W	T	F	S
••	••	••	••	••	••	••

Monitor twice daily after meals when used with Sulfonylureas, as needed when used with Metformin.

Sulfonylureas

S	M	T	W	T	F	S
	•		•		•	

Monitor 2 - 5 times weekly, less often once stable

Gliptins

S	M	T	W	T	F	S
	•		•		•	

Monitor 2 - 5 times weekly, less often once stable.

Cost

These figures are estimates and are for comparative reference only. Actual out-of-pocket costs vary over time, by pharmacy, insurance plan coverage, preparation and dosage. Under some plans name brands may be comparable in cost to generics.

Metformin *(Generic available)*

\$0.10 per day

\$10 / 3 months

Insulin *(No generic available – price varies by dose)*

Lantus: Vial, per 100 units: \$10
Pen, per 100 units: \$43

NPH: Vial, per 100 units: \$6
Pen, per 100 units: \$30

Short acting analog insulin: Vial, per 100 units: \$10
Pen, per 100 units: \$43

Glitazones *(No generic available)*

\$7.20 per day

\$650 / 3 months

Exenatide *(No generic available)*

\$9.00 per day

\$800 / 3 months

Sulfonylureas *(Generic available)*

\$0.10 per day

\$10 / 3 months

Gliptins *(No generic available)*

\$6.20 per day

\$560 / 3 months