CLINICAL INSIGHTS

BLUE CROSS Division of Blue Cross Laboratories

TENEBLU-M TABLETS ***Issue IV, No.13, 2024***

Dipeptidyl peptidase-4 inhibitors versus sulfonylureas on the top of metformin in patients with diabetes and acute myocardial infarction

Her AY, et al. Cardiovasc Diagn Ther 2024; 14(1):38-50

- Two important variables that may affect cardiovascular outcomes are the extent of glycated hemoglobin reduction and the duration of enhanced glycemic control.
- Therefore the impact of Metformin (MET) combined with dipeptidyl peptidase-4 (DPP4) inhibitors (MET + DPP4 inhibitor, n=468) or sulphonylurea (SU) (MET + SU, n=468) on clinical outcomes in patients with acute myocardial infarction (AMI) and type 2 diabetes mellitus (T2DM) was investigated.
- During the 3-year follow-up, incidence of major adverse cardiac events (MACE) between the two groups was similar (16.8% for MET + DPP4 inhibitor group *vs.* 19.4% for MET + SU group, p=0.302).
- However, incidence of recurrent MI was significantly lower in the MET + DPP4 inhibitor group than in the MET + SU group (1.3% *vs.* 4.9%, p=0.001).

Metformin combined with a DPP4 inhibitor is associated with a reduced incidence of recurrent MI in T2DM patients.

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