



CARDIOMETABOLIC HEALTH CONGRESS

March 4-5, 2016 • San Francisco, CA

Can We Slow Progression of Type 2 Diabetes?

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Can We Slow Progression of Type 2 Diabetes?

Simple Answer

Yes, but it isn't easy!

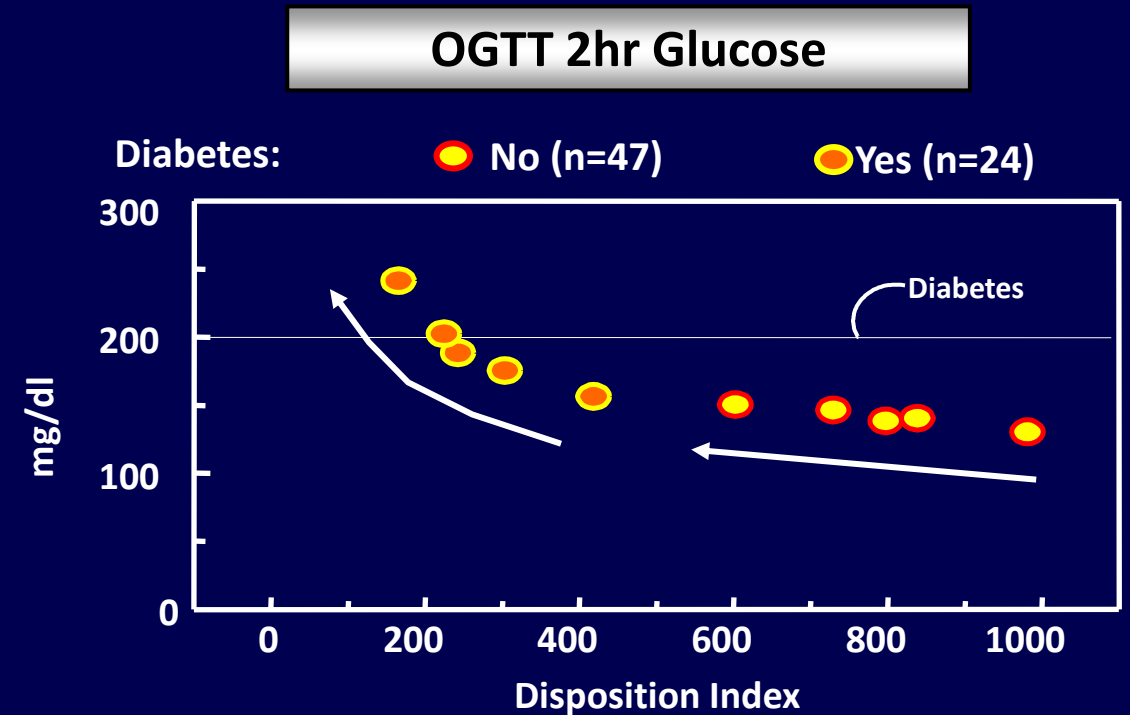
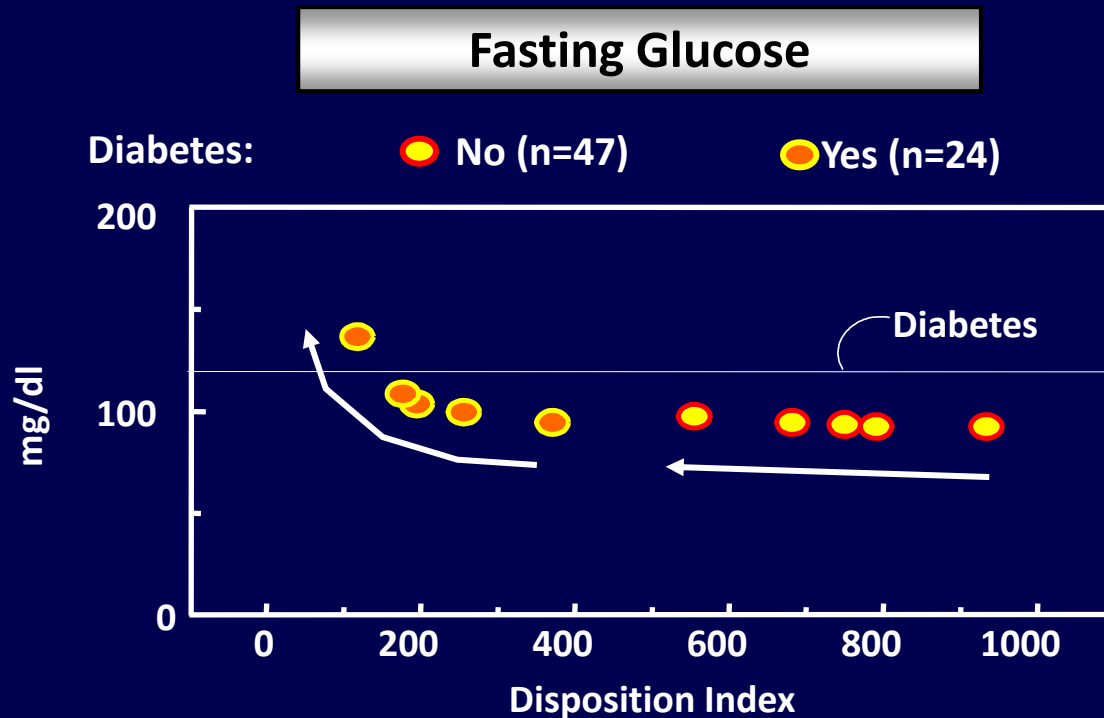
Can We Slow Progression of Type 2 Diabetes?

Three Contexts

- Glucose Regulation
- Clinical Prevention Studies
- Mechanistic Studies

Evolution of Hyperglycemia

Relation to β -cell Compensation

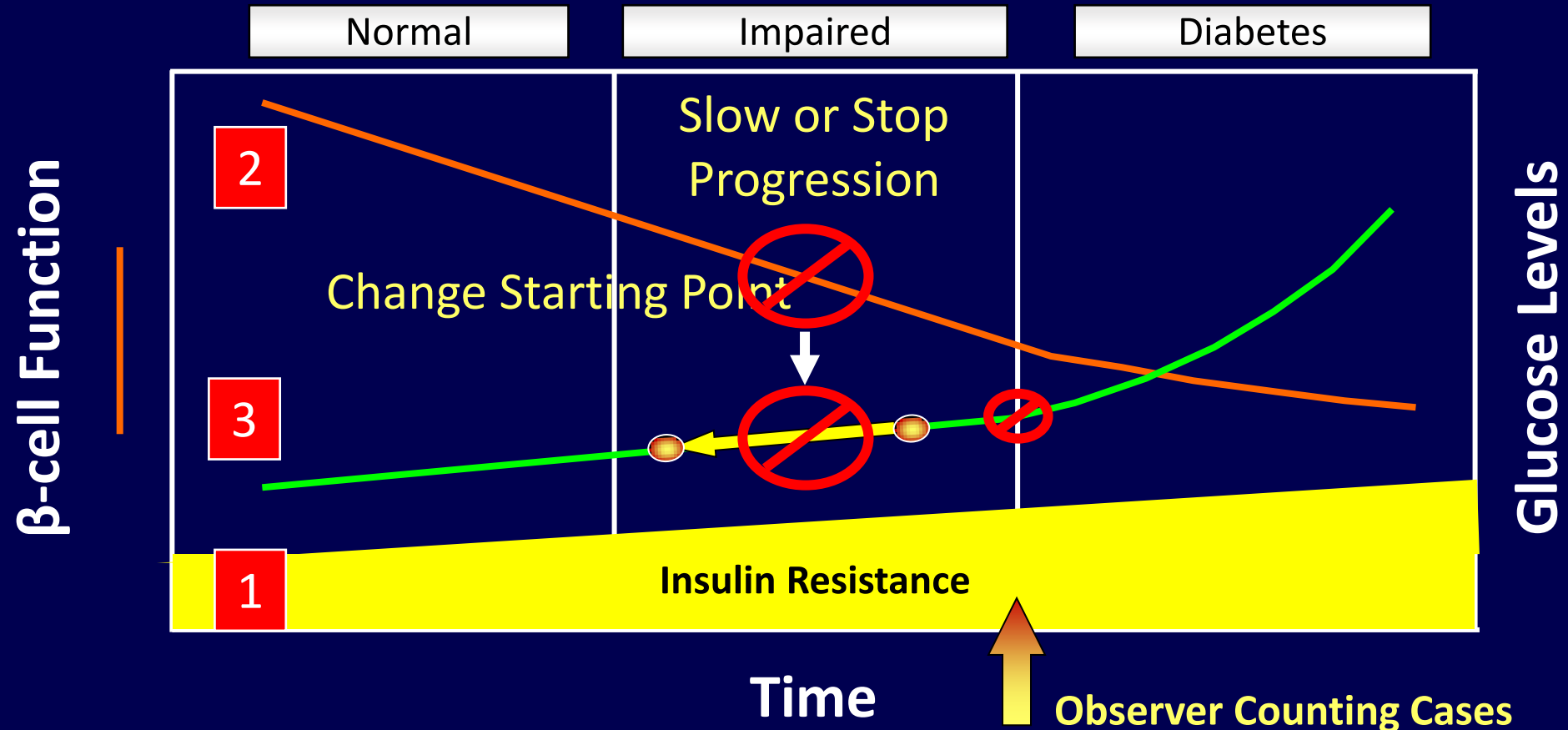


Prior GDMs (n=71): OGTTs and IVGTTs at 15, 30, 45, 60, 75 months postpartum

Xiang et al. 2006; *Diabetes* 55:1074-1079

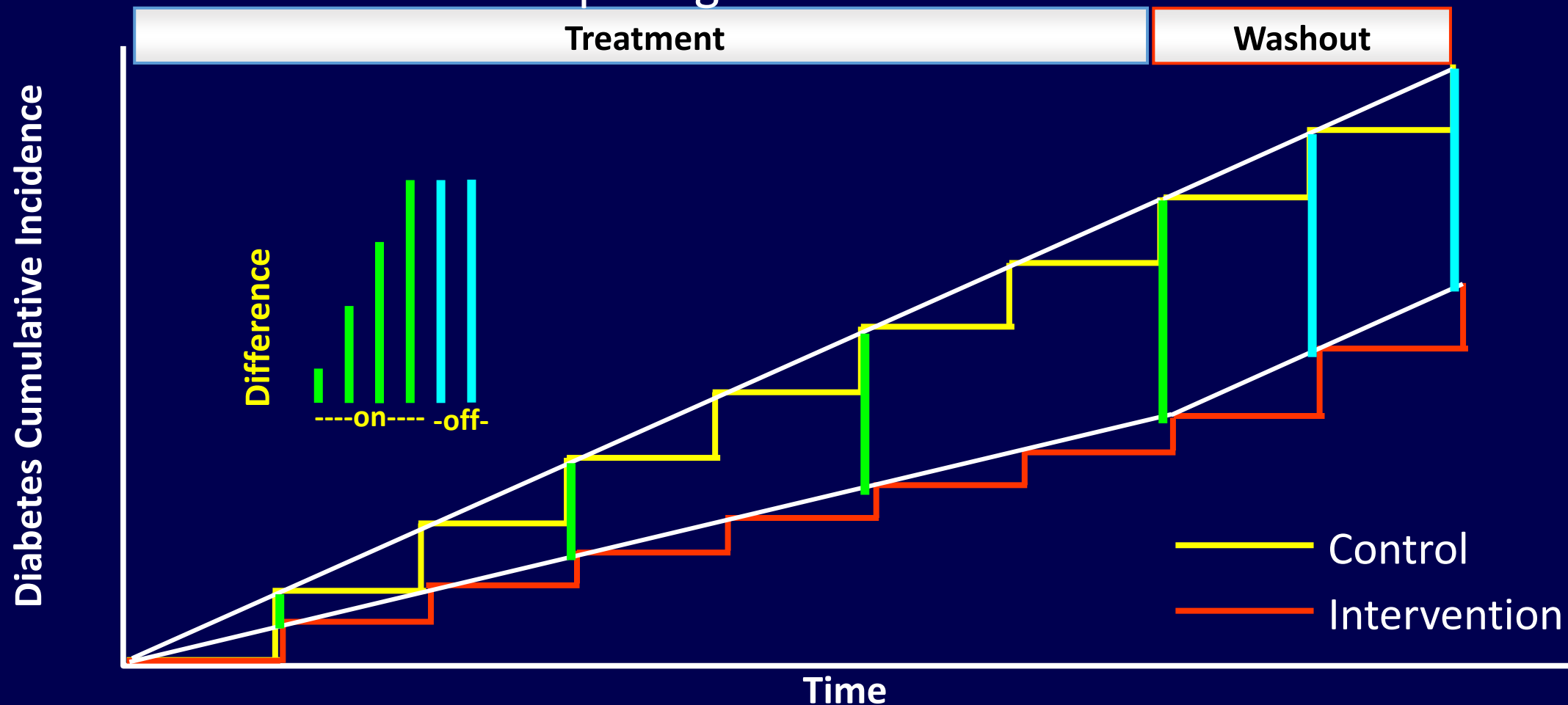
Diabetes “Prevention” in Clinical Trials

The Binary View (“On-off Switch”): Don’t Cross the Line



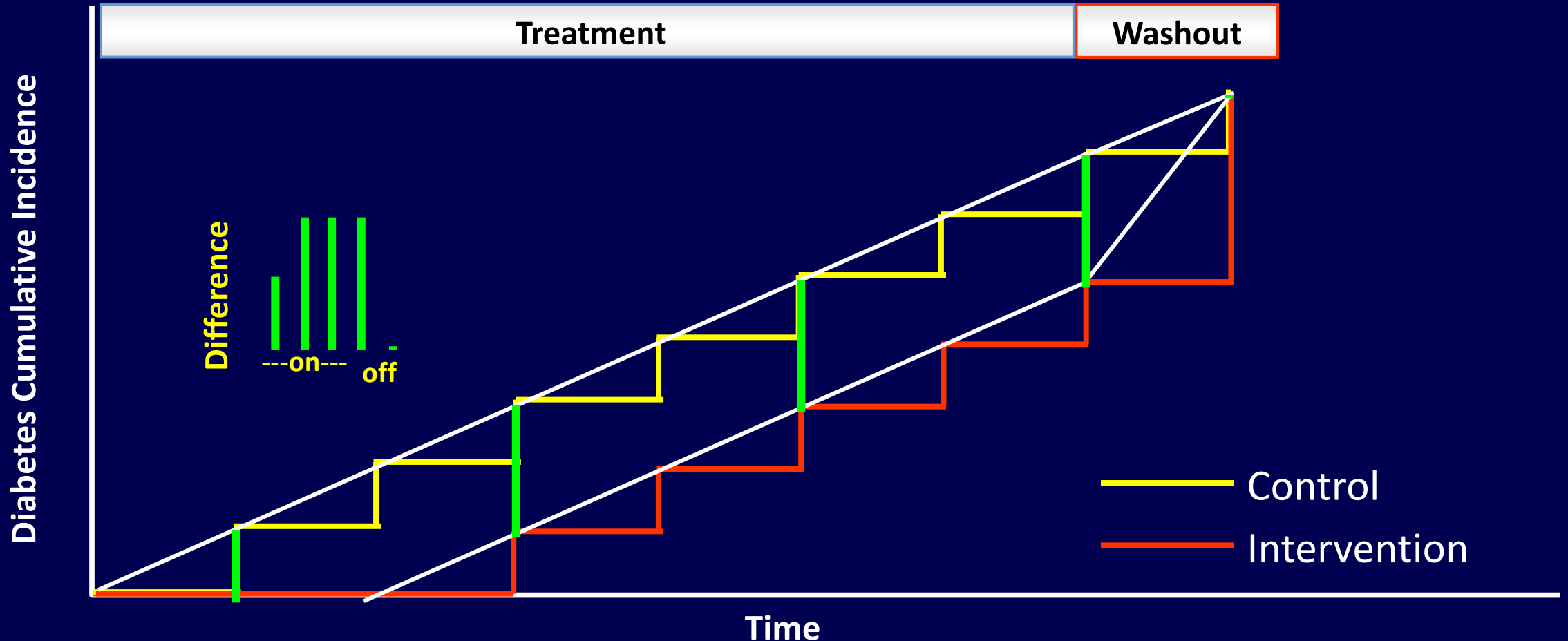
Real Disease Modification

Slow or Stop Progression in Treated Individuals



Masking Disease Progression

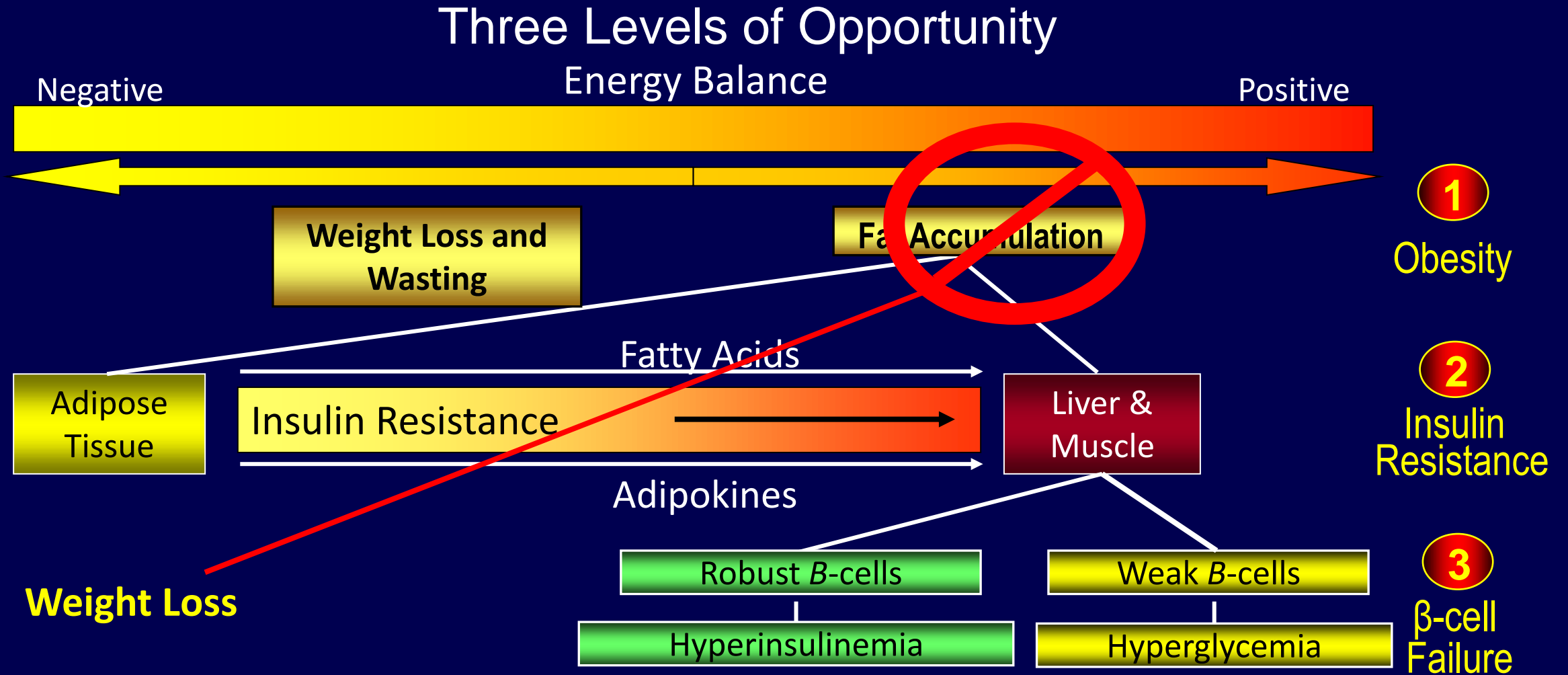
Change the Starting Point (Lower Glucose While on Drug)



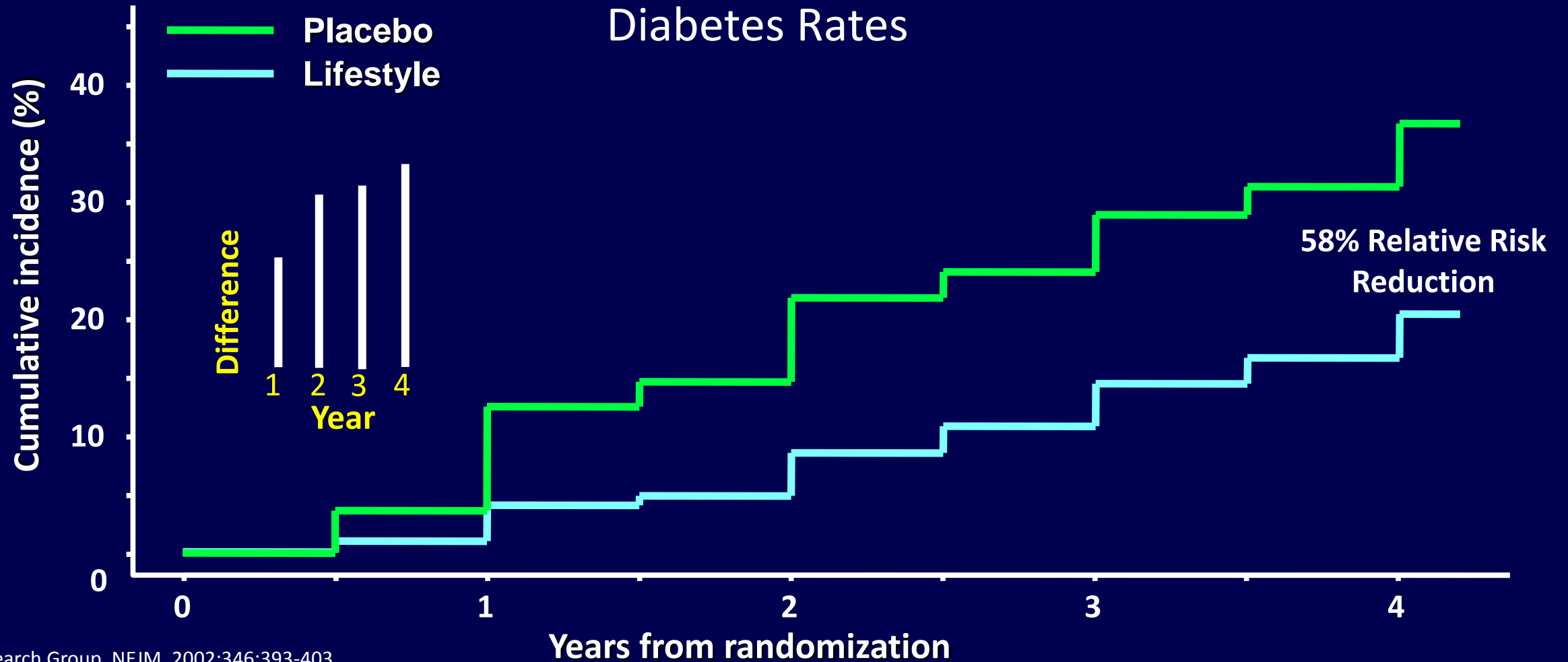
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Results of T2DM Prevention Studies

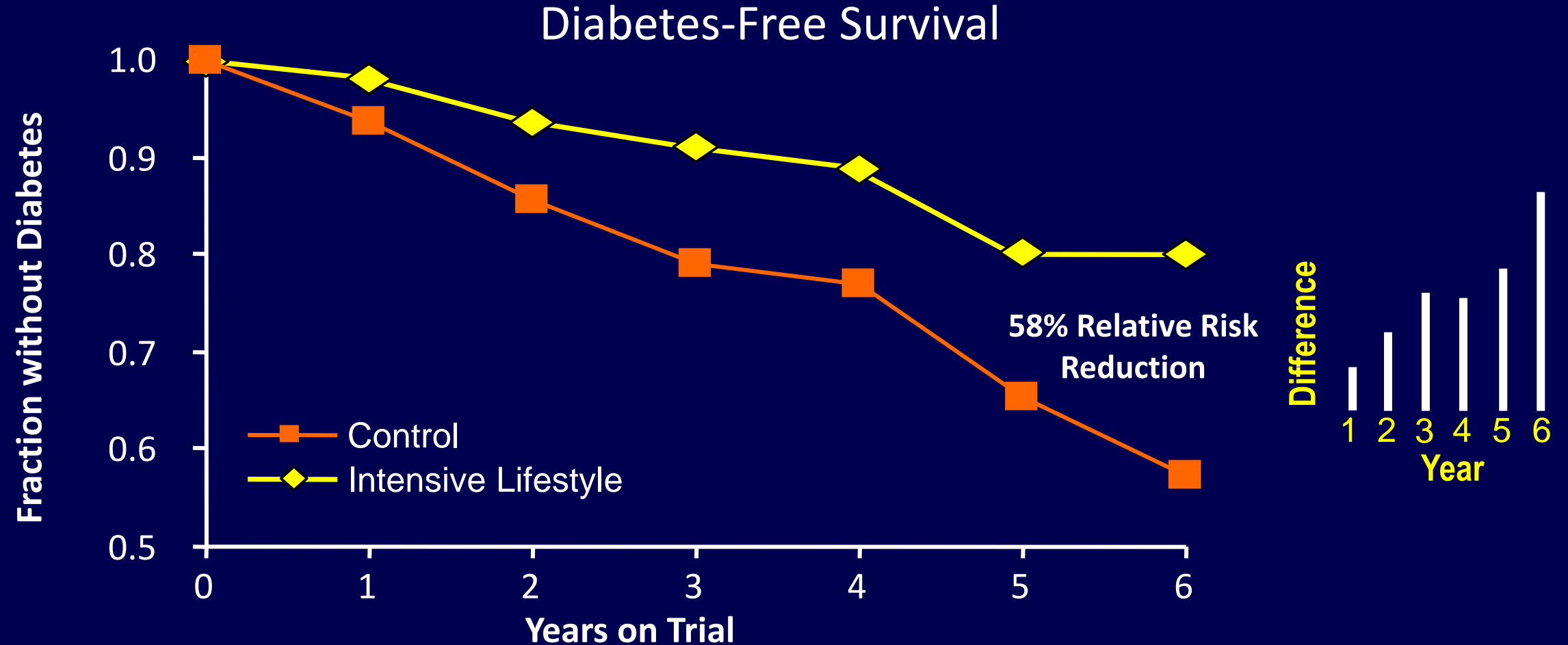
Etiology of Diabetes Prevention



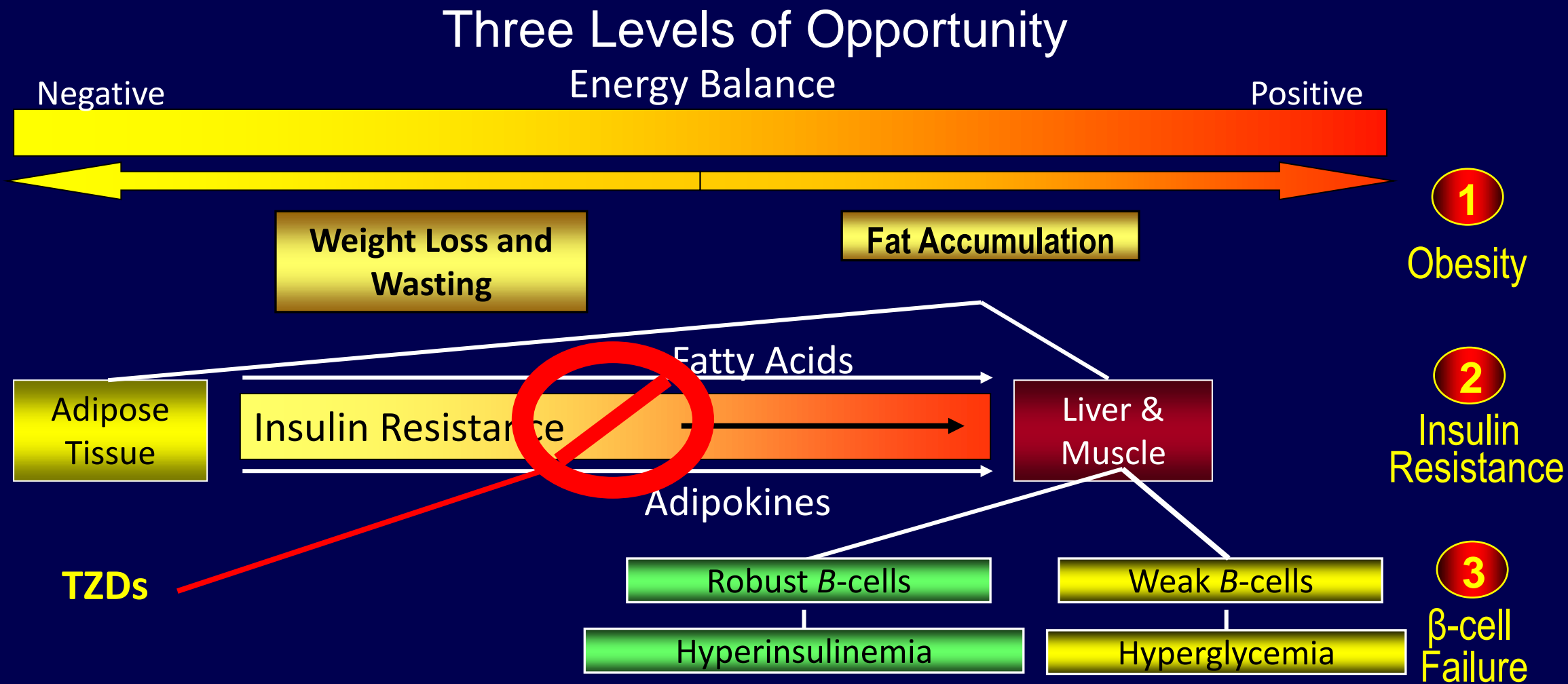
US Diabetes Prevention Program



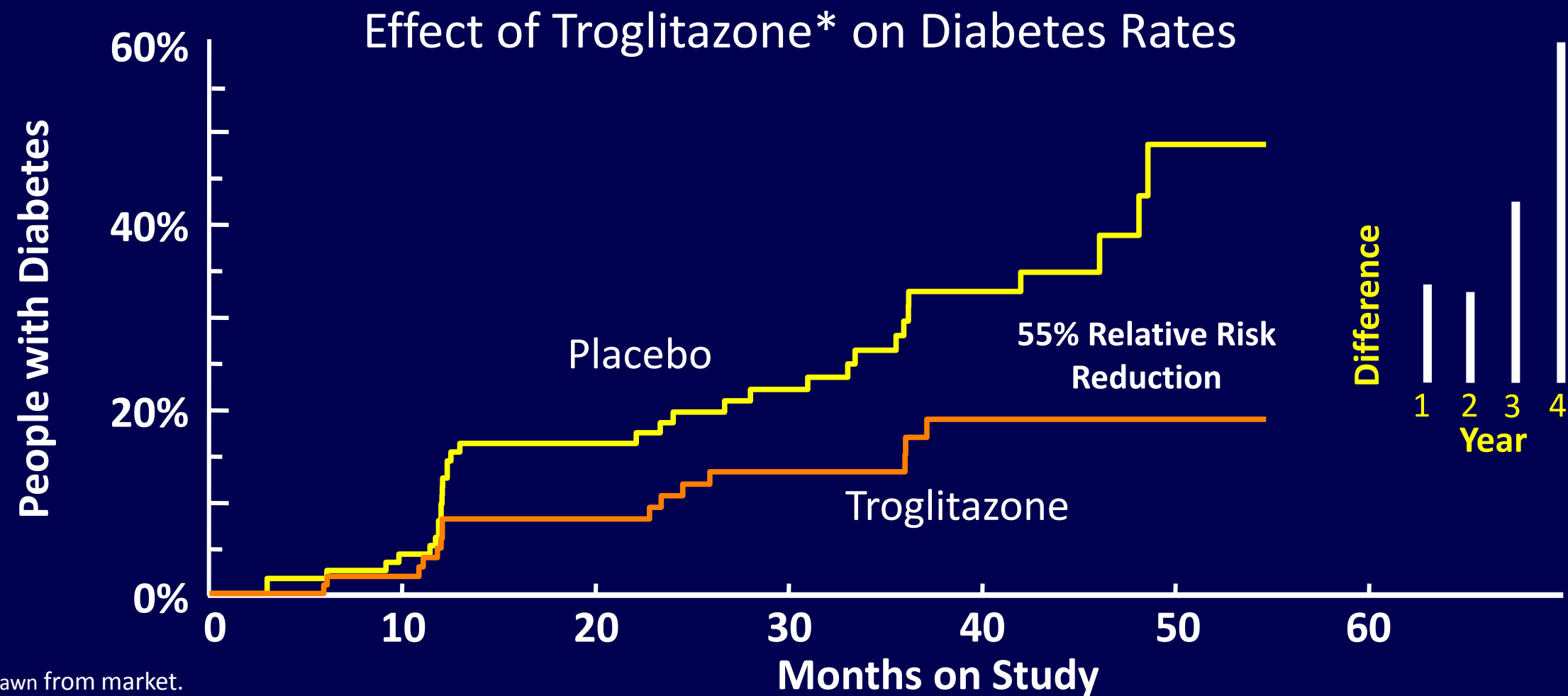
Finnish Diabetes Prevention Study



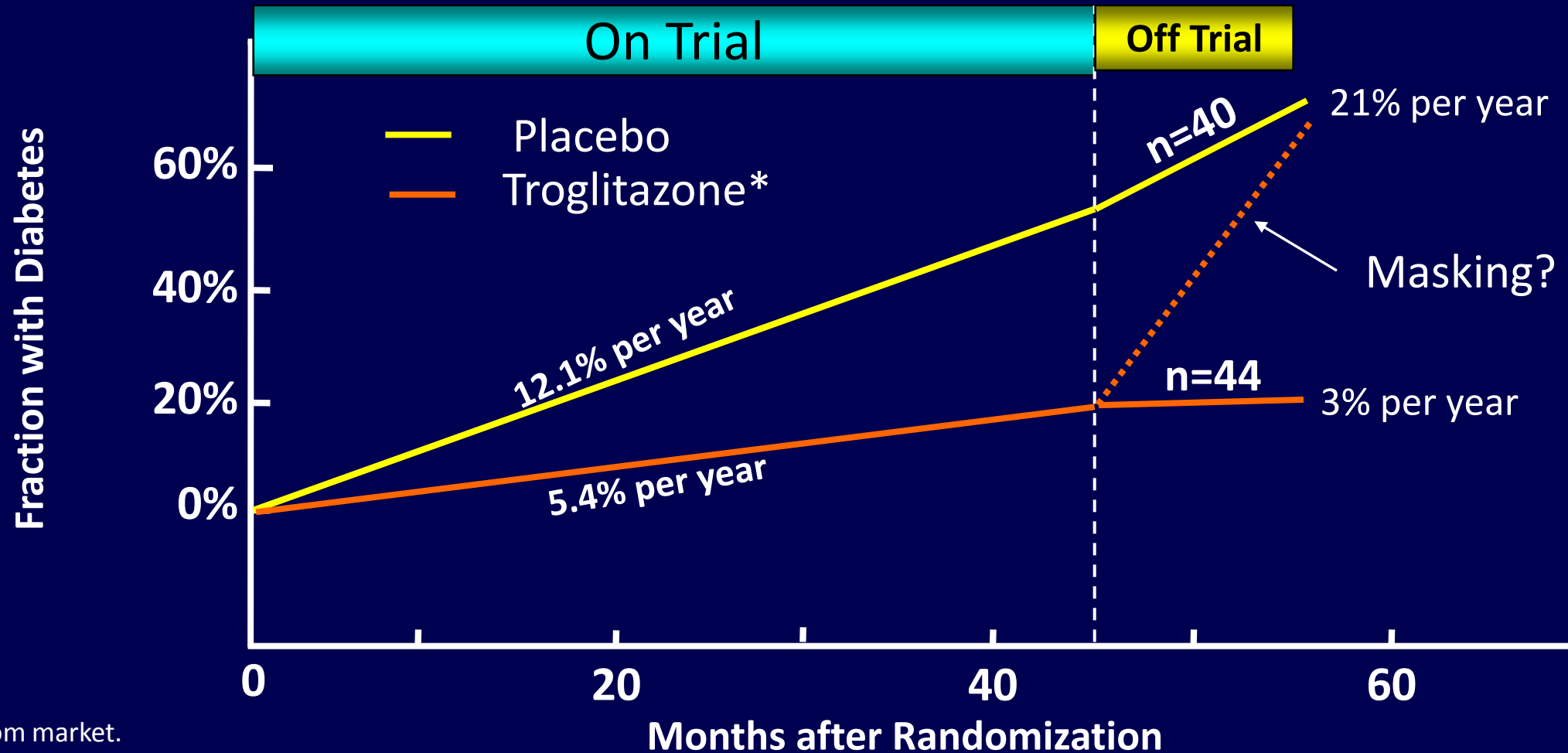
Preventing Type 2 Diabetes



TRIPOD Study

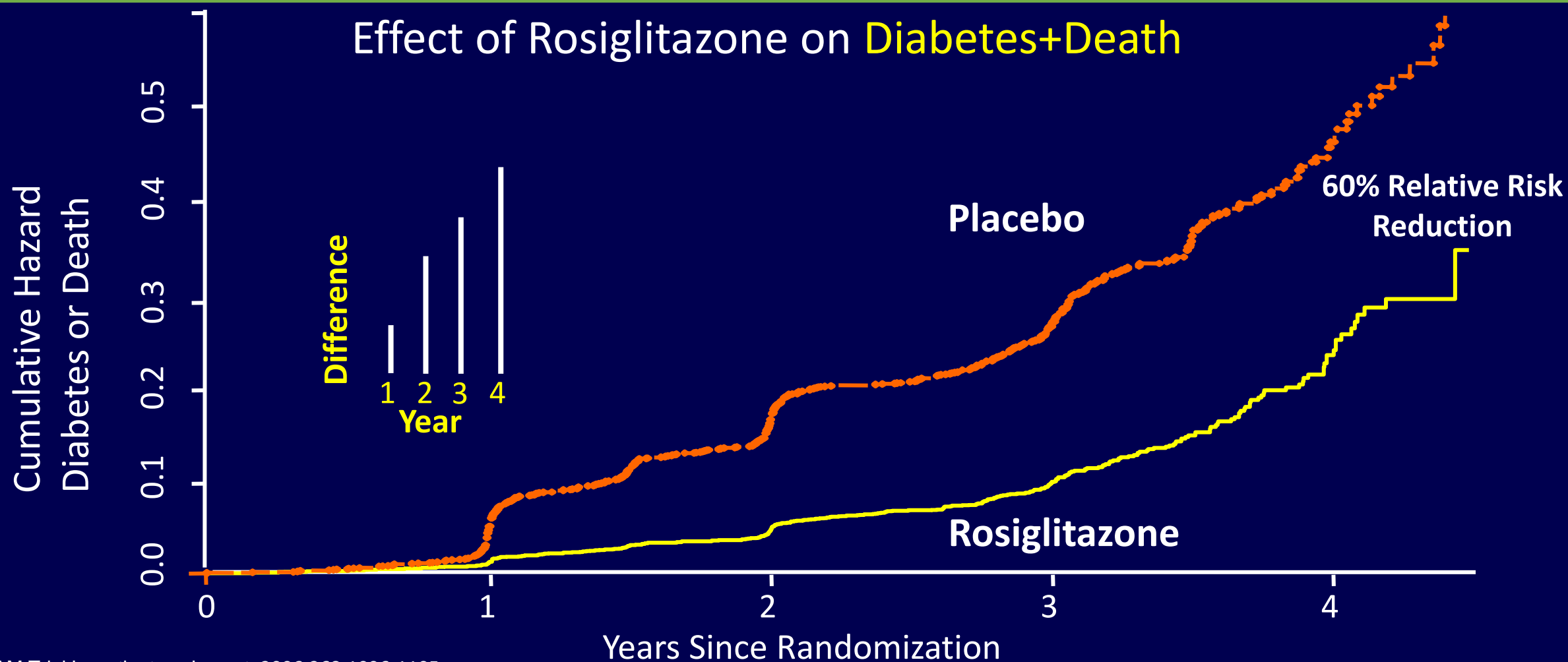


TRIPOD Study: Diabetes Rates During Washout



*Withdrawn from market.
Buchanan et al. Diabetes. 2002;51:2796-2803.

DREAM Study

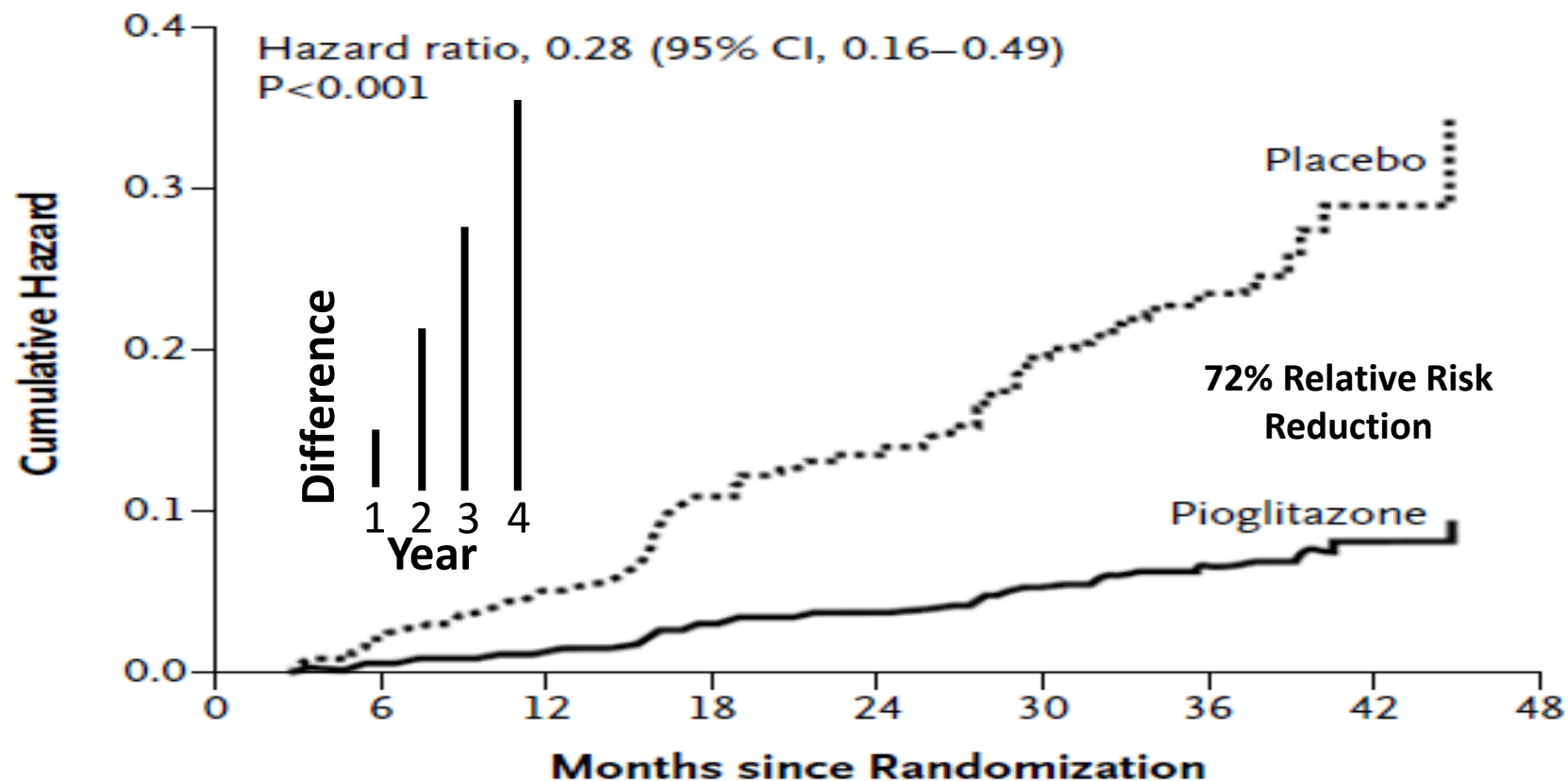


DREAM Trial Investigators. Lancet. 2006;368:1096-1105.

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ACT NOW Study

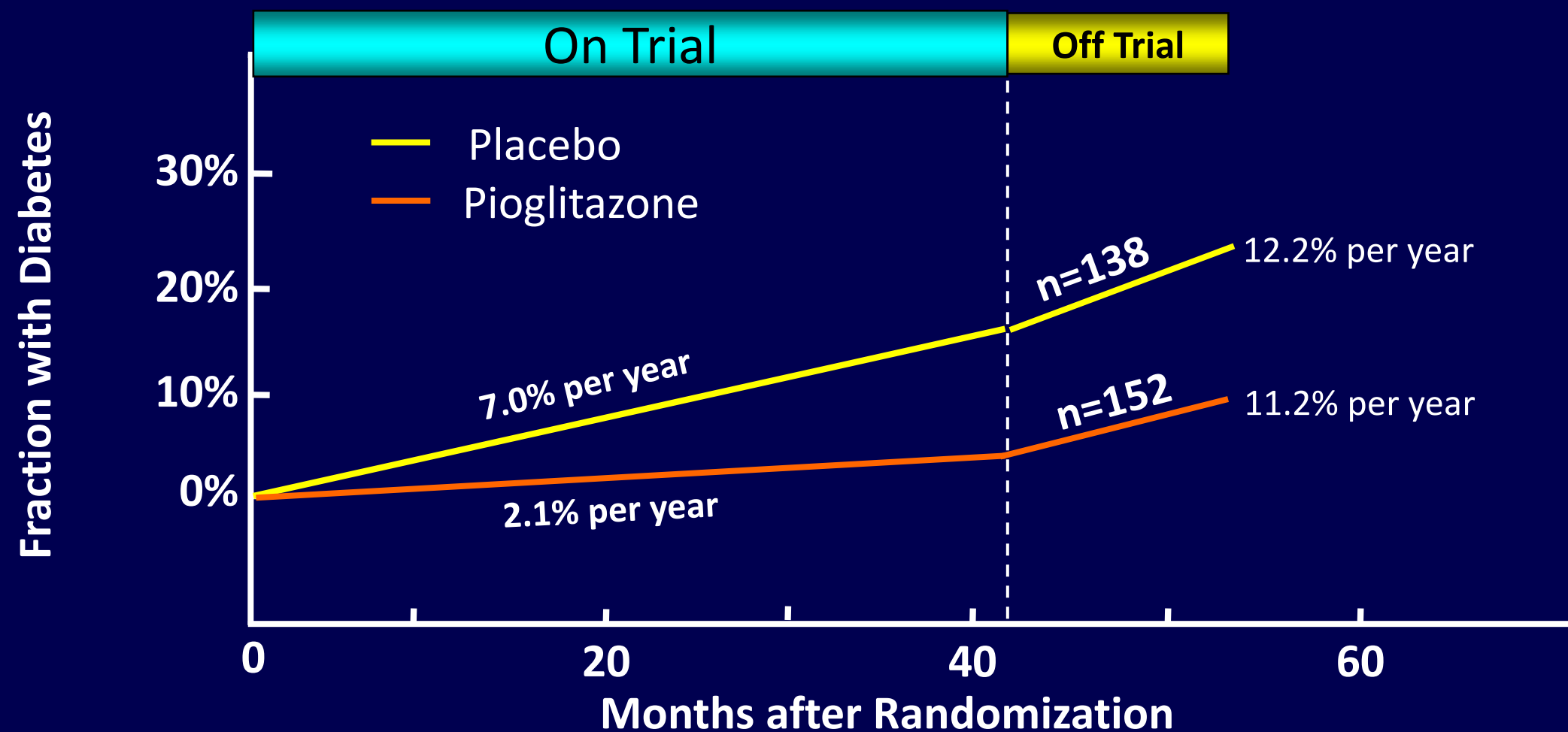
Effect of Pioglitazone on Diabetes Rates



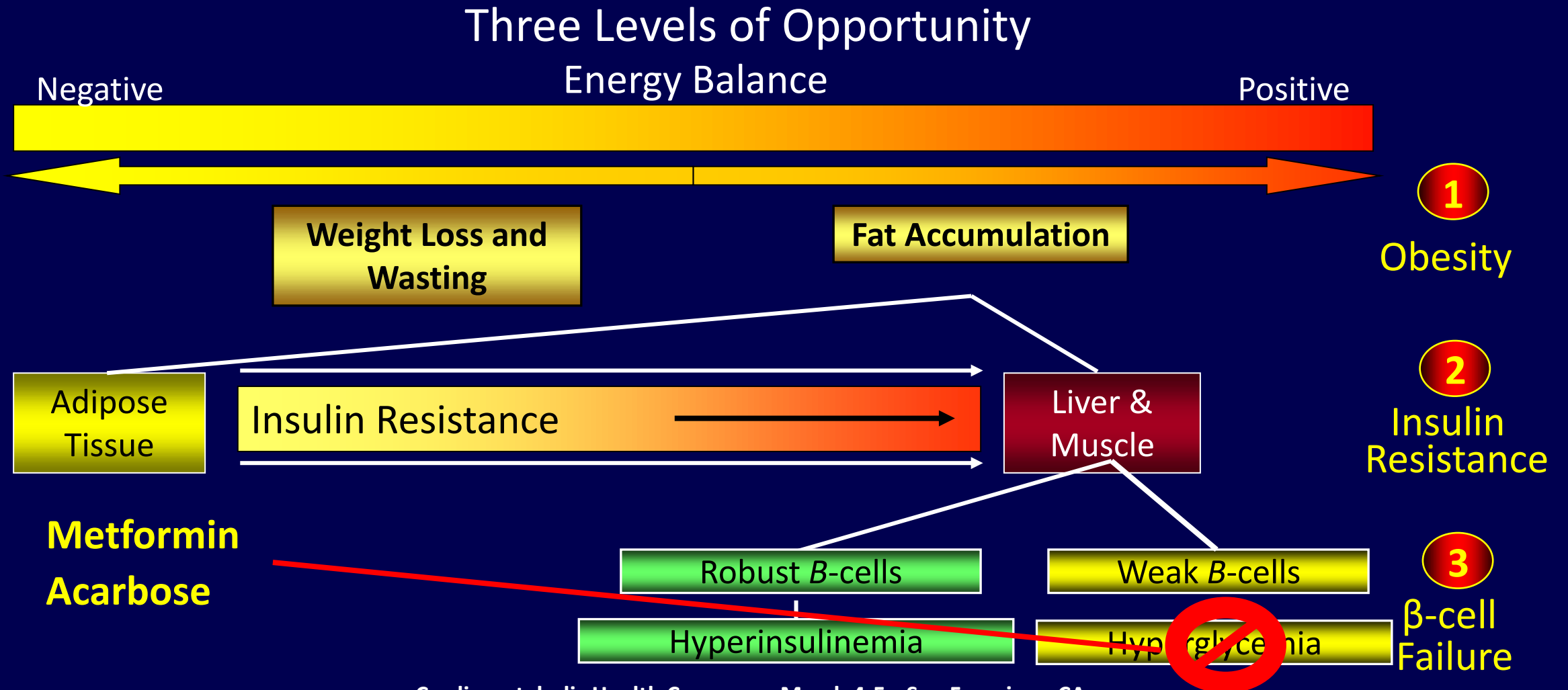
DeFronzo et al. NEJM. 2011;364:1104-1115

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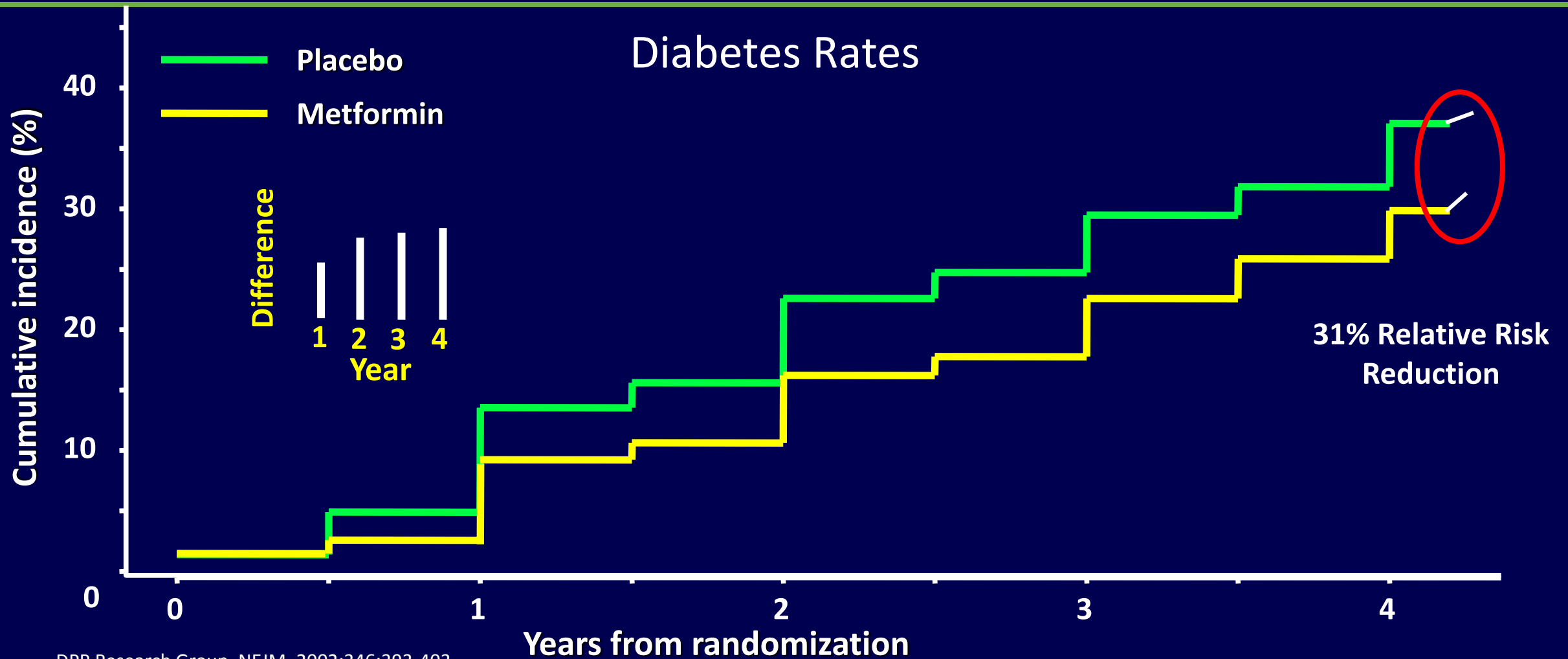
ACT NOW Study: Diabetes Rates During Washout



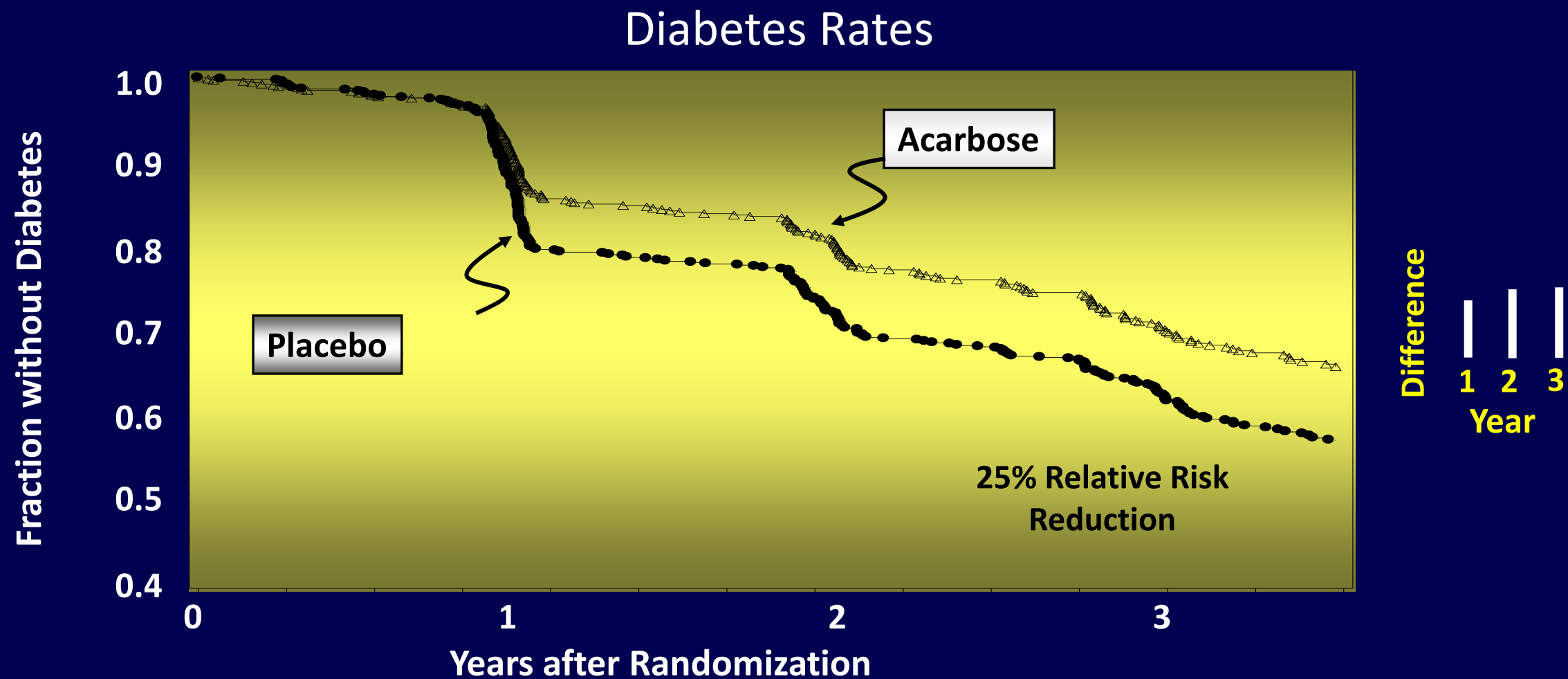
Etiology of Diabetes Prevention



US Diabetes Prevention Program

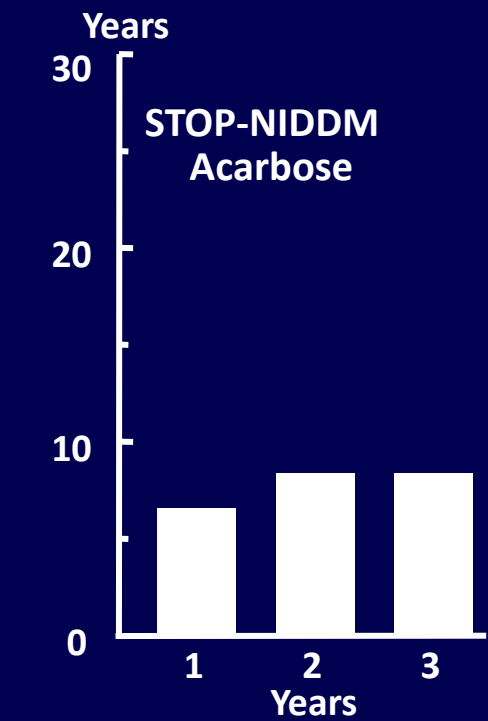
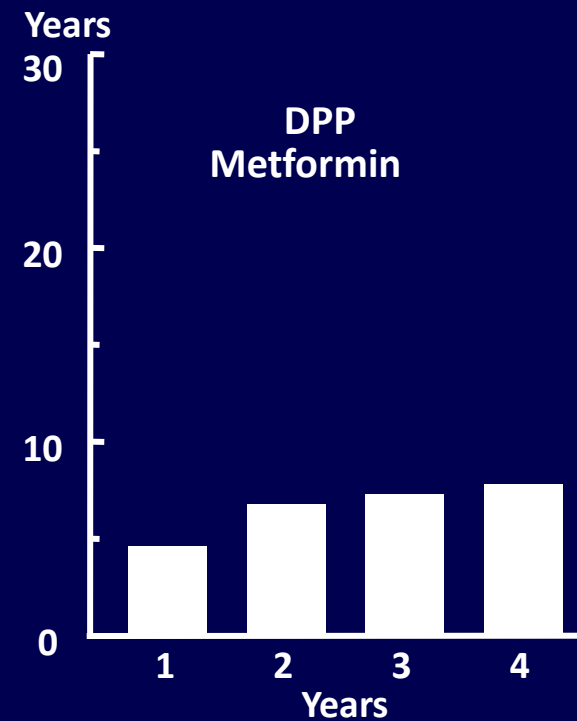
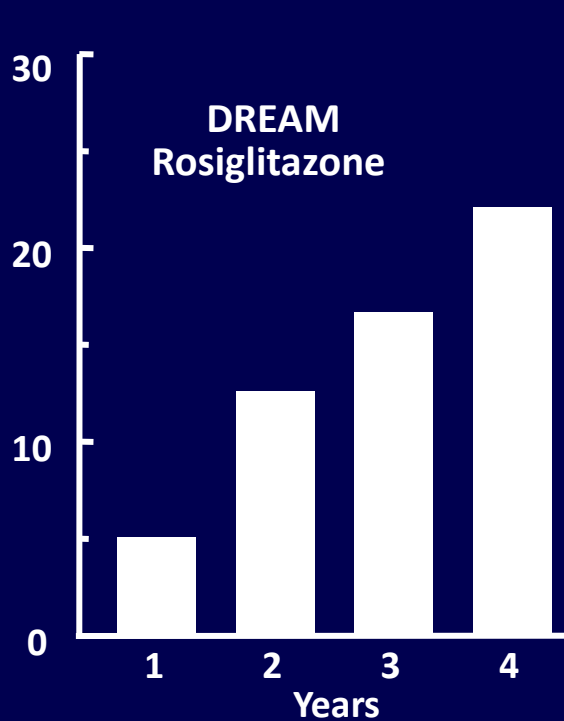
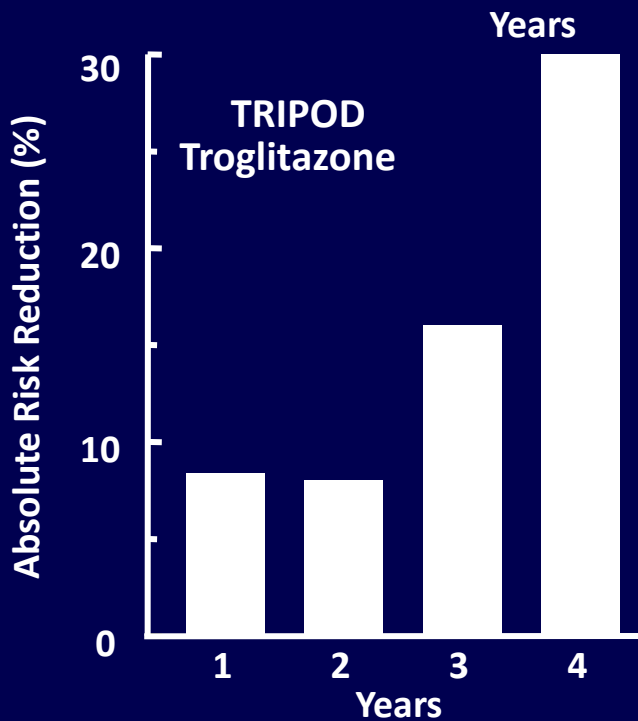
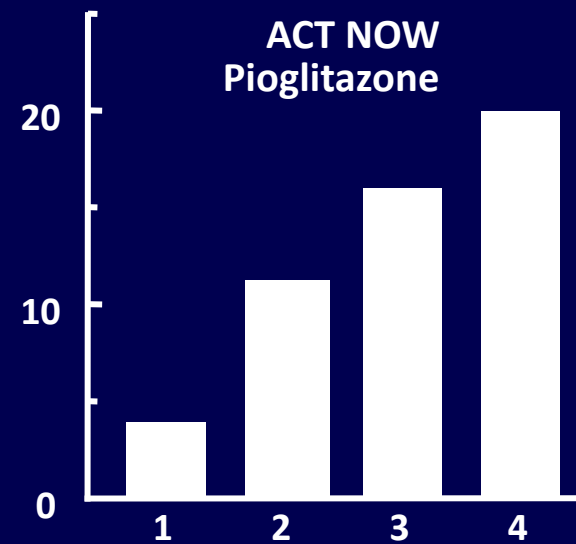
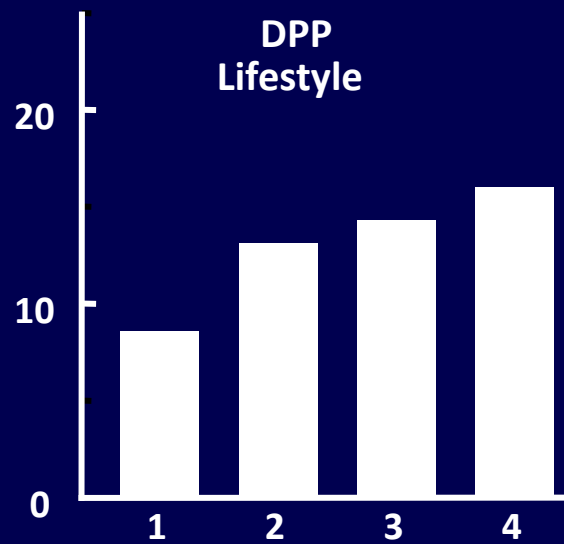
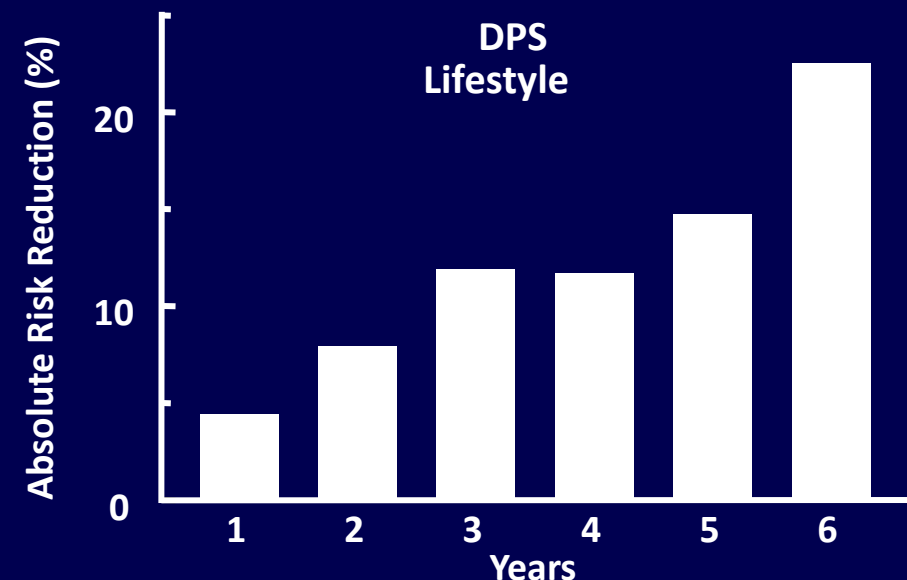


The STOP-NIDDM Study



Chiasson et al. Lancet. 2002;359:2072-2077

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Adapted from Buchanan, Diabetes 2007;56:1502-1507

Can We Slow Progression of Type 2 Diabetes?

Lesson from T2DM Prevention Studies

Interventions aimed at reducing body fat or its impact on insulin resistance provide the best evidence for slowing progression to T2DM.

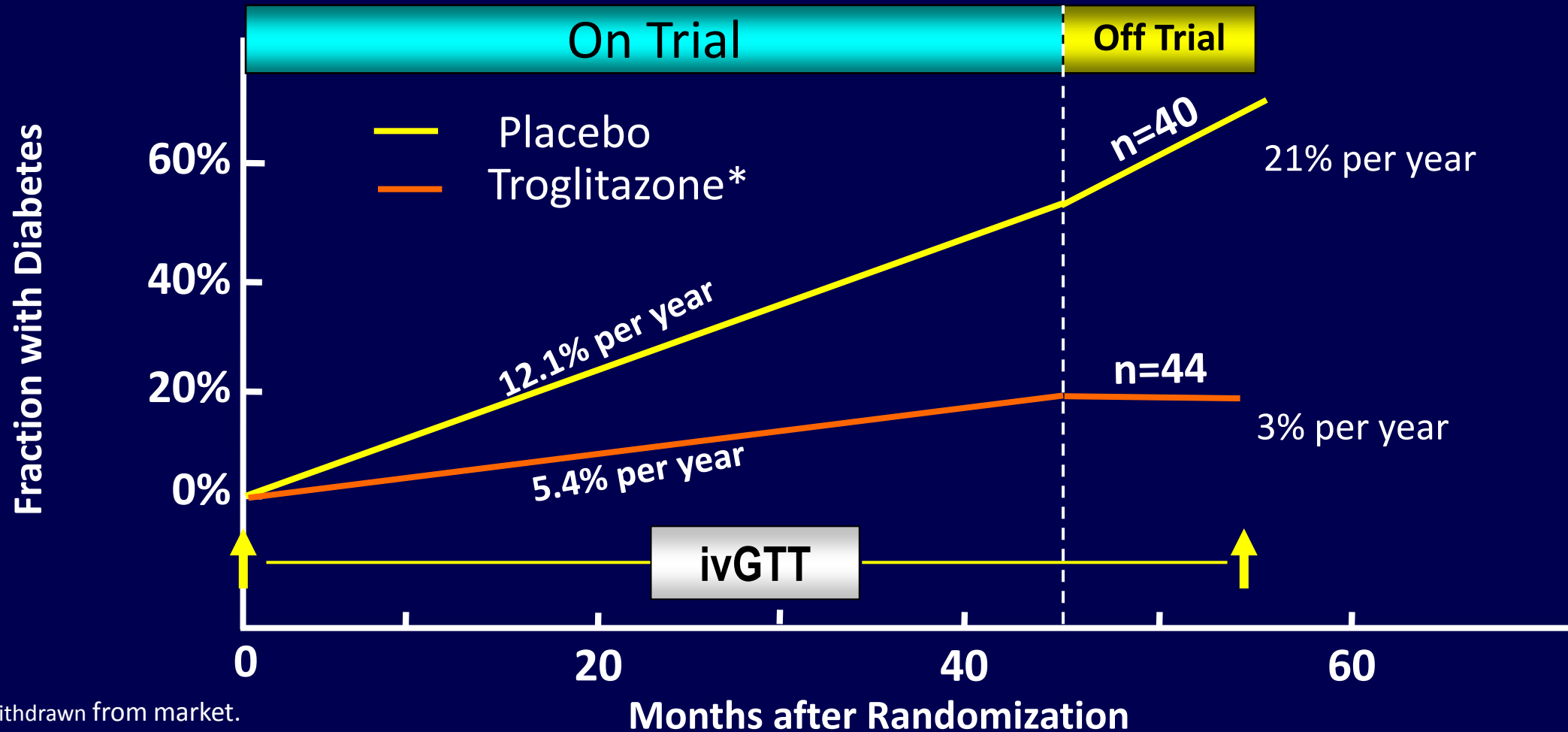
Can We Slow Progression of Type 2 Diabetes?

Mechanistic Studies

- ✦ β -cell preservation

- ✦ β -cell “rest”

TRIPOD Study: Was There β -cell Preservation?



*Withdrawn from market.

Buchanan et al. Diabetes. 2002;51:2796-2803.

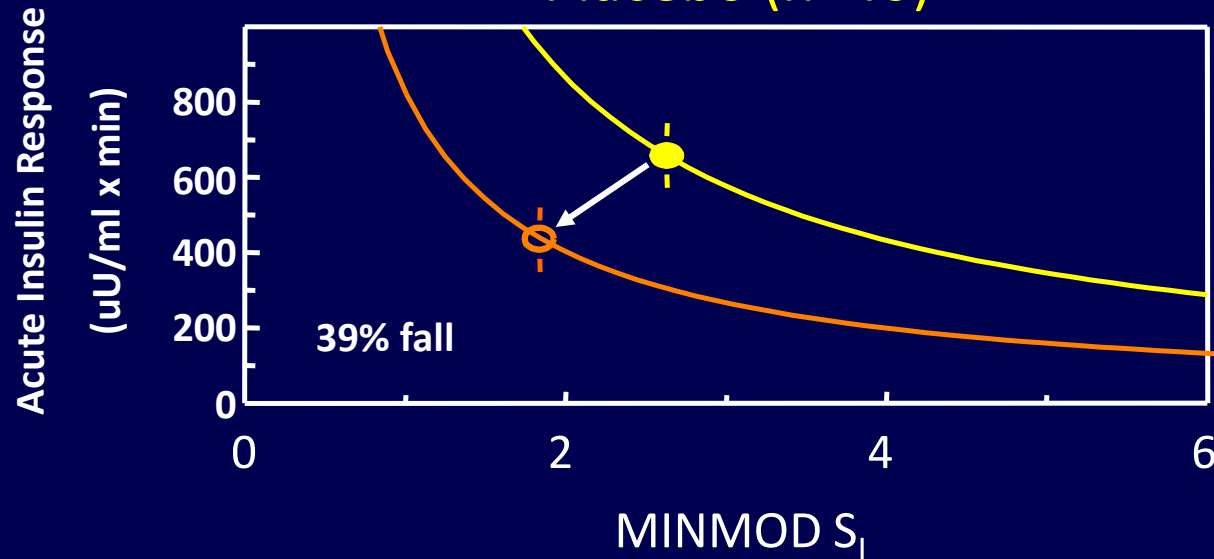
TRIPOD: Preservation of β -cell Function

Women without diabetes during trial

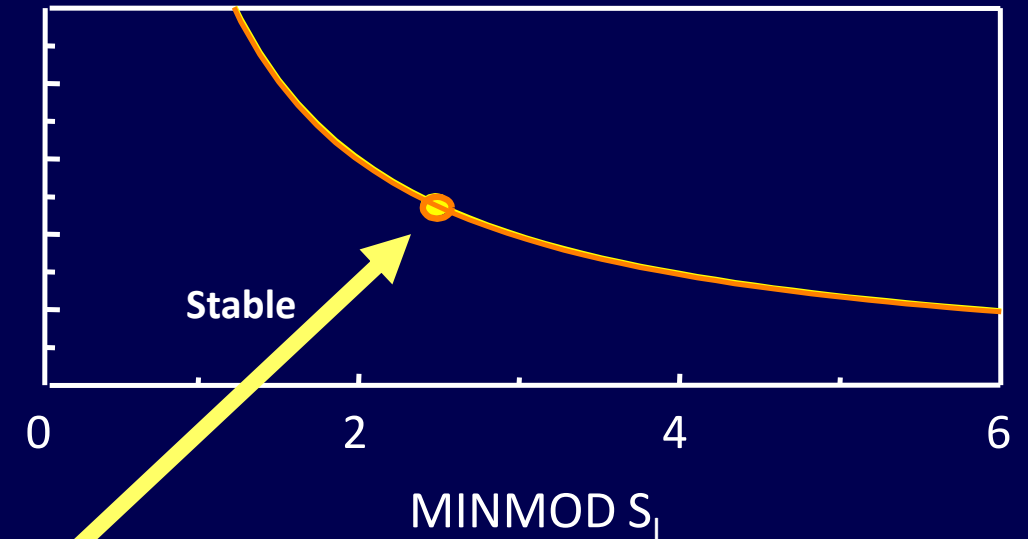
● Baseline

○ 8 Months Post-trial

Placebo (n=40)



Troglitazone* (n=44)

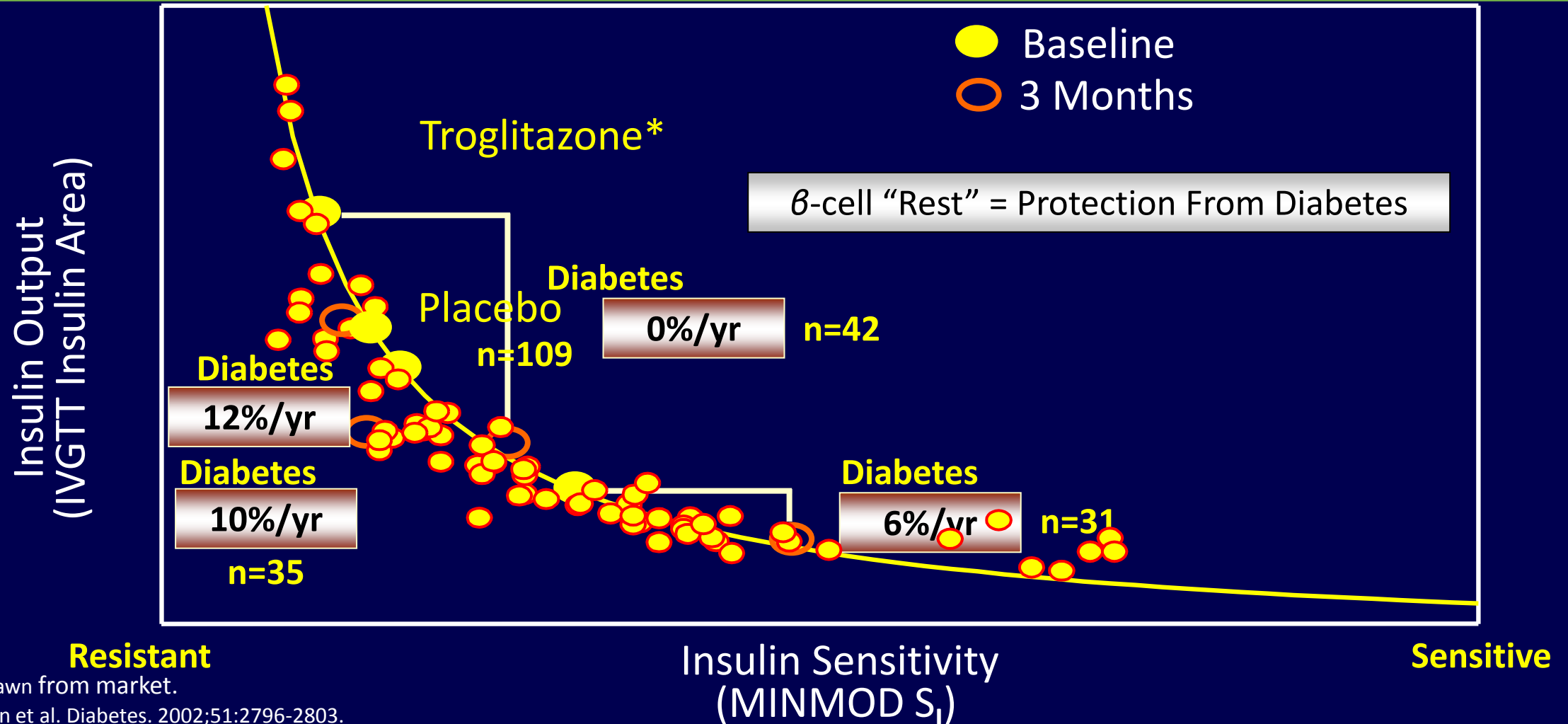


β -cell Preservation

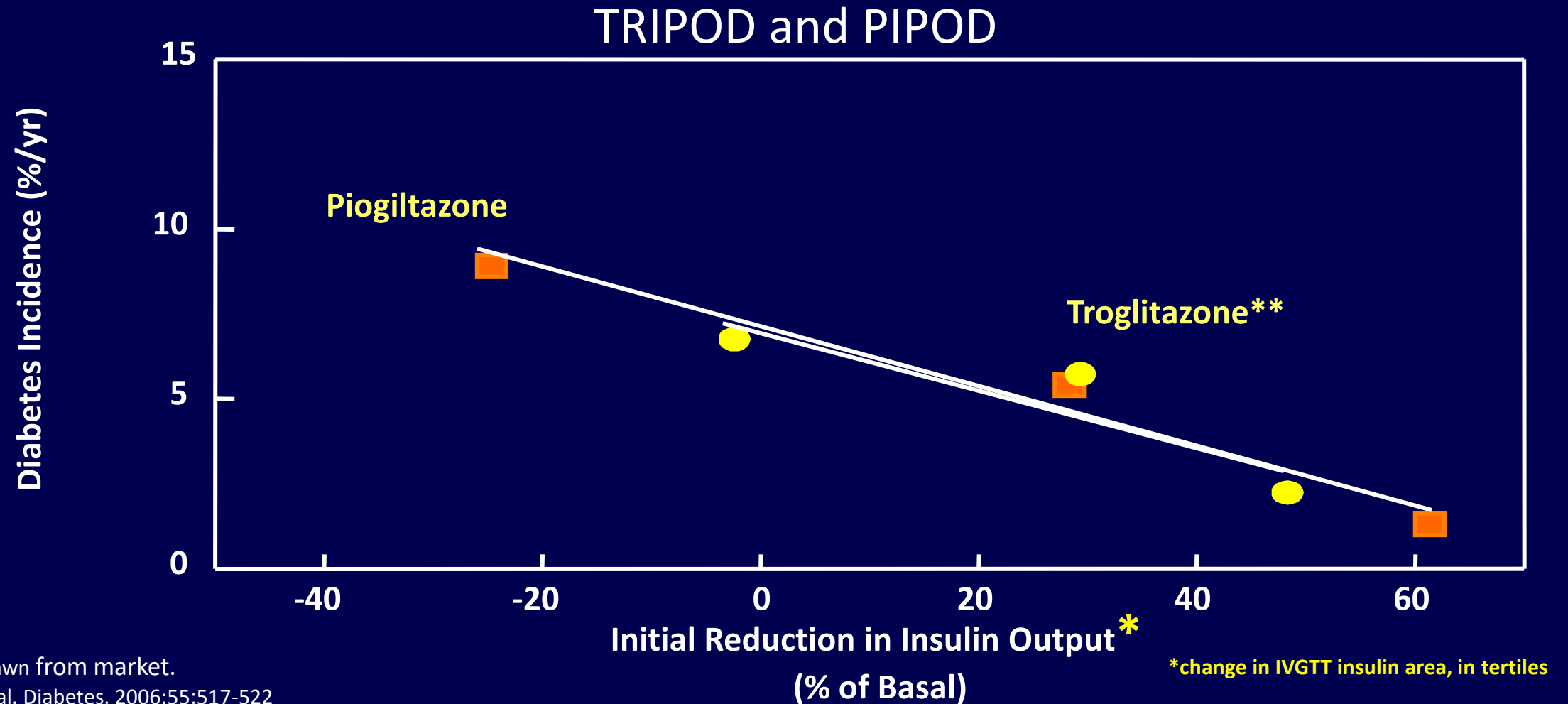
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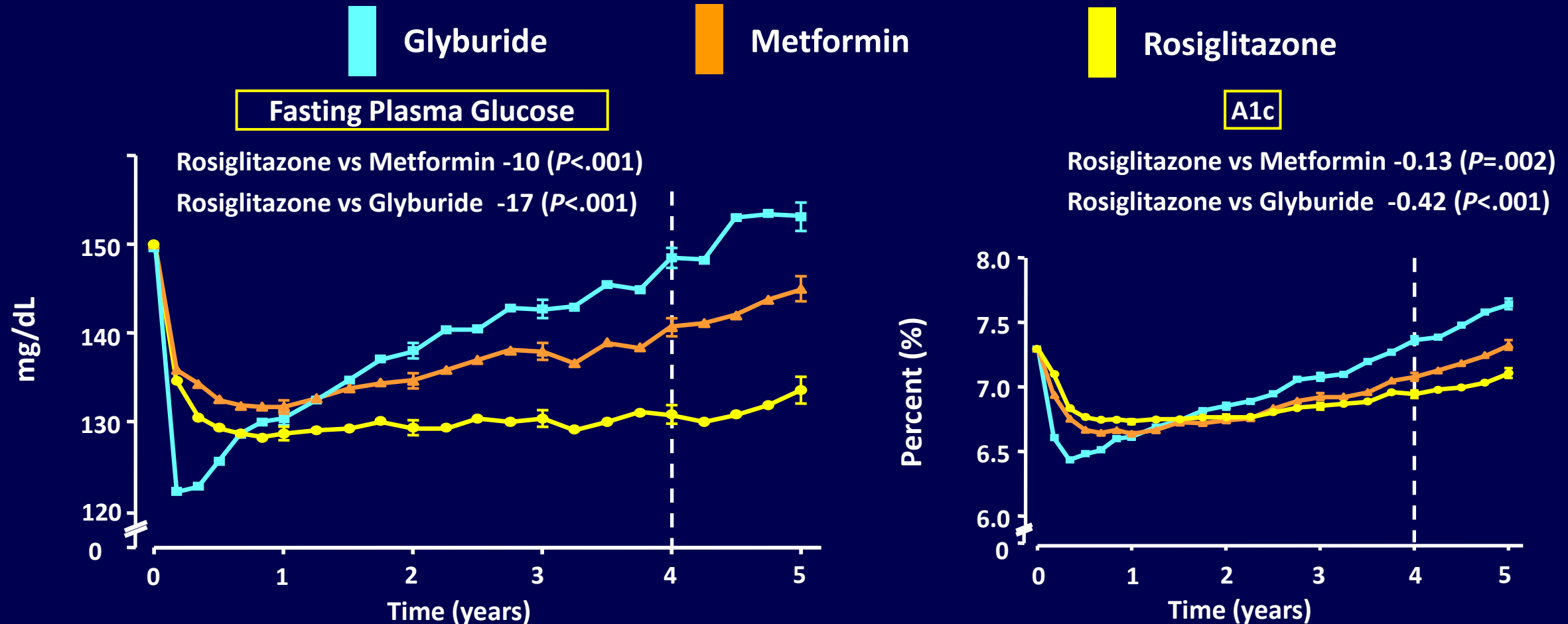
TRIPOD: β -cell “Rest” and Protection from Diabetes



β -cell “Rest” and Diabetes Rates



ADOPT: Fasting Plasma Glucose and A1c Over Time



Kahn et al. NEJM. 2006;355:2427-2443

Can We Slow Progression of Type 2 Diabetes?

Take Home Messages

- ✦ Progression to T2DM can be slowed, even stopped in some people.
- ✦ Interventions aimed at reducing body fat or its impact on insulin resistance provide the best evidence for slowing progression.
- ✦ β -cell “rest” appears to be an important mechanism for protection.
- ✦ Lifestyle and medical interventions tested to date fail to slow or stop progression in many patients.

We need more effective/aggressive approaches to mitigating obesity and/or its metabolic effects to stop the epidemic of T2DM.

Thank You



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