

## **Understanding NICE guidance**

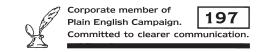
Information for people who use NHS services

# Liraglutide for type 2 diabetes

NICE 'technology appraisal guidance' advises on when and how drugs and other treatments should be used in the NHS.

This leaflet is about when **liraglutide** should be used to treat people with type 2 diabetes in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people with type 2 diabetes but it may also be useful for their families or carers or for anyone with an interest in the condition.

It does not describe type 2 diabetes or the treatments in detail – a member of your healthcare team should discuss these with you. You can get more information from the organisations listed on the back page.



This may not be the only possible treatment for type 2 diabetes. Your healthcare team should talk to you about whether it is suitable for you and about other treatment options available.

#### What has NICE said?

NICE recommends liraglutide taken at a dose of 1.2 mg once a day as a possible treatment for some people with type 2 diabetes mellitus (see below). However, NICE does not recommend liraglutide taken at a higher dose of 1.8 mg once a day.

## Who can have liraglutide?

You should be able to have liraglutide (at a dose of 1.2 mg once a day) when given with two other drugs for diabetes (that is, with a type of drug called metformin and either a type of drug known as a sulphonylurea or a thiazolidinedione), if your blood glucose level isn't under control and:

- you have a high body mass index (BMI 35 kg/m<sup>2</sup> or higher<sup>1</sup>) and problems associated with high body weight or
- your BMI is under 35 kg/m<sup>2</sup> and losing weight would help other weight-related health problems, or taking insulin would greatly affect your ability to work.

You should be able to have liraglutide (at a dose of 1.2 mg once a day) when given with one other drug for diabetes (that is, with either metformin or a sulphonylurea) if:

- you cannot take either metformin **or** a sulphonylurea for medical reasons, or you had to stop taking one of these drugs because you had a bad reaction to it, and
- you cannot take both thiazolidinediones and dipeptidyl peptidase-4 (DPP-4) inhibitors for medical reasons, or you had to stop taking both of these types of drugs because you had a bad reaction to them.

You should be able to carry on taking liraglutide in these circumstances as long as it has helped to improve your diabetes sufficiently (that is, reduced your blood glucose levels, and helped you lose weight if needed) after 6 months of treatment.

## Why has NICE said this?

NICE looks at how well treatments work, and also at how well they work in relation to how much they cost the NHS. NICE recommended liraglutide given with one other drug for diabetes in these circumstances because there is a clinical need for people whose only alternative is early treatment with insulin. NICE recommended liraglutide given with two other drugs for diabetes in these circumstances because its cost is justified by the benefits it provides. There was no evidence to show that liraglutide works better if the dose is increased from 1.2 mg to 1.8 mg, so NICE did not recommend the higher dose.

<sup>&</sup>lt;sup>1</sup> This figure is for people of European descent and should be adjusted for people from other ethnic groups.

## Type 2 diabetes mellitus

Diabetes mellitus (or more commonly known as diabetes) is a condition in which the amount of glucose (sugar) in the blood is too high because the body cannot use it properly. Insulin is a hormone that the body produces to control the level of glucose in the blood. Uncontrolled high blood glucose levels can lead to serious health problems.

There are two types of diabetes. Type 1 diabetes occurs when the body is unable to produce any insulin. Type 2 diabetes occurs when the body can still make some insulin, but not enough, or when the body cannot use the insulin it produces properly (also known as insulin resistance) and is often associated with obesity.

## Liraglutide

Liraglutide is a drug for the treatment of type 2 diabetes. It triggers the release of insulin and also blocks a hormone called glucagon (which stops insulin from working properly) from being produced. In addition, liraglutide reduces a person's appetite and the amount of food that they eat by keeping the stomach full for longer.

#### What does this mean for me?

When NICE recommends a treatment, the NHS must make sure it is available to those people it could help, normally within 3 months of the guidance being issued.

So, if you have type 2 diabetes, and you and your doctor think that liraglutide is the right treatment for you (see 'What has NICE said?' on page 2), you should be able to have the treatment on the NHS. Please see www.nice.org.uk/aboutguidance if you think you are eligible for the treatment but it is not available.

If you are already taking liraglutide at a dose of 1.2 mg once a day for type 2 diabetes and you don't meet the circumstances given on page 2 (see 'What has NICE said?'), or you are taking liraglutide at the higher dose of 1.8 mg once a day, you should be able to continue taking it until you and your healthcare professional decide it is the right time to stop.

#### More information

The organisations below can provide more information and support for people with type 2 diabetes. NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- Black and Ethnic Minority Diabetes Association, 020 7723 5357
   www.bemda.org
- Diabetes Research & Wellness Foundation, 023 9263 7808
   www.drwf.org.uk
- Diabetes UK, 0845 120 2960 www.diabetes.org.uk
- South Asian Health Foundation, 0780 228 8182
   www.sahf.org.uk
- Surya Foundation, 020 8398 9292
   www.suryafoundation.org.uk

NHS Choices (**www.nhs.uk**) may be a good place to find out more. Your local patient advice and liaison service (usually known as 'PALS') may be able to give you more information and support. If you live in Wales you should speak to NHS Direct Wales for information on who to contact.

#### **About NICE**

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating medical conditions. The guidance is written by independent experts, including healthcare professionals and people representing patients and carers. They consider the evidence on the disease and treatments, the views of patients and carers and the experiences of doctors, nurses and other healthcare professionals, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This leaflet and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/guidance/TA203

You can order printed copies of this leaflet from NICE publications (phone 0845 003 7783 or email publications@nice.org.uk and quote reference N2337). The NICE website has a screen reader service called Browsealoud, which allows you to listen to our guidance. Click on the Browsealoud logo on the NICE website to use this service.

We encourage NHS and voluntary organisations to use text from this leaflet in their own information about type 2 diabetes.

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ISBN 978-1-84936-388-4 N2337 POD 1P Oct 10