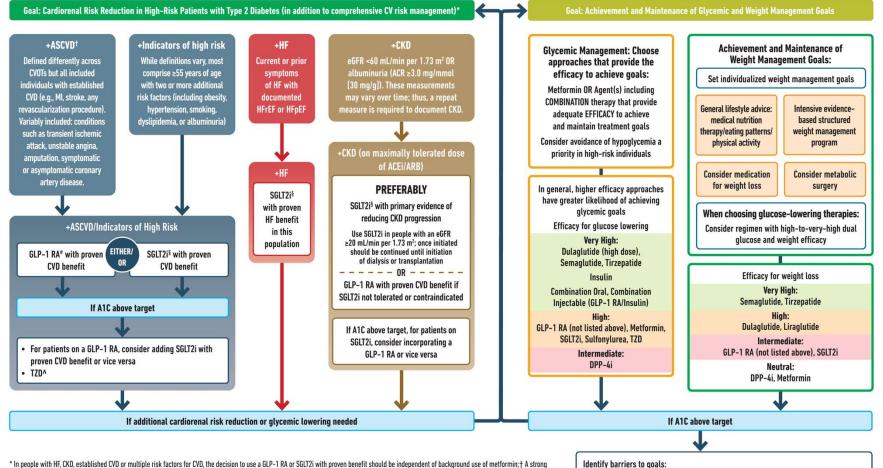
USE OF GLUCOSE-LOWERING MEDICATIONS IN THE MANAGEMENT OF TYPE 2 DIABETES

HEALTHY LIFESTYLE BEHAVIORS: DIABETES SELF-MANAGEMENT EDUCATION AND SUPPORT (DSMES): SOCIAL DETERMINANTS OF HEALTH (SDOH)

9. Pharmacologic Approaches to Glycemic Treatment: Sta Care in Diabetes-2023 IIII



* In people with HF, CKD, established CVD or multiple risk factors for CVD, the decision to use a GLP-1 RA or SGLT2i with proven benefit should be independent of background use of metformin; † A strong recommendation is warranted for people with CVD and a weaker recommendation for those with indicators of high CV risk. Moreover, a higher absolute risk reduction and thus lower numbers needed to treat are seen at higher levels of baseline risk and should be factored into the shared decision-making process. See text for details; ^ Low-dose TZD may be better tolerated and similarly effective; § For SGLT2i, CV/ renal outcomes trials demonstrate their efficacy in reducing the risk of composite MACE, CV death, all-cause mortality, MI, HHF, and renal outcomes in individuals with T2D with established/high risk of CVD; # For GLP-1 RA, CVOTs demonstrate their efficacy in reducing composite MACE, CV death, all-cause mortality, MI, stroke, and renal endpoints in individuals with T2D with established/high risk of CVD.

- . Consider DSMES referral to support self-efficacy in achievement of goals
- . Consider technology (e.g., diagnostic CGM) to identify therapeutic gaps and tailor therapy
- . Identify and address SDOH that impact achievement of goals

