

Common Oral Diabetes Meds



Class/Main Action	Name(s)	Daily Dose Range	Considerations
Biguanides <ul style="list-style-type: none"> Decreases hepatic glucose output First line med at diagnosis of type 2 	metformin (Glucophage)	500 - 2500 mg (usually BID w/ meal)	Side effects: nausea, bloating, diarrhea, B12 deficiency. To minimize GI Side effects, use XR and take w/ meals. Obtain GFR before starting. <ul style="list-style-type: none"> If GFR <30, do not use. If GFR <45, don't start Metformin If pt on Metformin and GFR falls to 30-45, eval risk vs. benefit; consider decreasing dose. For dye study, if GFR <60, liver disease, alcoholism or heart failure, restart metformin after 48 hours if renal function stable. Benefits: lowers cholesterol, no hypo or weight gain, cheap. Approved for pediatrics, 10 yrs + Lowers A1c 1.0%-2.0%.
	Riomet (liquid metformin)	500 - 2500mg 500mg/5mL	
	Extended Release-XR (Glucophage XR) (Glumetza) (Fortamet)	(1x daily w/dinner) 500 - 2000 mg 500 - 2000 mg 500 - 2500 mg	
Sulfonylureas <ul style="list-style-type: none"> Stimulates sustained insulin release 	glyburide: (Diabeta) (Glynase PresTabs)	1.25 - 20 mg 0.75 - 12 mg	Can take once or twice daily before meals. Low cost generic. Side effects: hypoglycemia and weight gain. Eliminated via kidney. Caution: Glyburide most likely to cause hypoglycemia. Lowers A1c 1.0% - 2.0%.
	glipizide: (Glucotrol) (Glucotrol XL)	2.5 - 40 mg 2.5 - 20 mg	
	glimepiride (Amaryl)	1.0 - 8 mg	

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SGLT2 Inhibitors “Glucoretic” <ul style="list-style-type: none"> Decreases glucose reabsorption in kidneys 	Canagliflozin (Invokana)	100 - 300 mg 1x daily Don't start if GFR <45.	Side effects: hypotension, UTIs, increased urination, genital infections, ketoacidosis. Monitor GFR and other considerations: See package insert for dosing adjustment based on GFR. - Canagliflozin increases risk of amputation. - Dapagliflozin, don't use in pts w/ bladder cancer. - Empagliflozin & canagliflozin decrease risk of death from CV disease. Benefits: no hypo or weight gain. Lowers A1c 1.0%-2.0%. Lowers wt 1-3 lbs.
	Dapagliflozin (Farxiga)	5 - 10 mg 1x daily Don't start if GFR<60.	
	Empagliflozin (Jardiance)	10 - 25 mg 1x daily Don't start if GFR <45.	
	Ertugliflozin (Steglatro)	5 – 15 mg 1x daily Don't start if GFR <60.	
DPP – 4 Inhibitors “Incretin Enhancers” <ul style="list-style-type: none"> Prolongs action of gut hormones Increases insulin secretion Delays gastric emptying 	sitagliptin (Januvia)	25 - 100 mg daily – eliminated via kidney*	* If creat elevated, see med insert for dosing. Side effects: headache and flu-like symptoms. Can cause severe, disabling joint pain. Contact MD, stop med. Report signs of pancreatitis. † Saxagliptin and alogliptin can increase risk of heart failure. Notify MD for shortness of breath, edema, weakness, etc. † Saxagliptin and alogliptin can increase risk of heart failure. Notify MD for shortness of breath, edema, weakness, etc. No wt gain or hypoglycemia. Lowers A1c 0.6%-0.8%.
	saxagliptin (Onglyza)†	2.5 - 5 mg daily – eliminated via kidney*, feces	
	linagliptin (Tradjenta)	5 mg daily – eliminated via feces	
	alogliptin (Nesina)†	6.25 - 25 mg daily – eliminated via kidney*	

Note: Content is for educational purposes only; please consult prescribing information for details.

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