

ANTI-DIABETIC AGENTS

AGENT	FORMULARY STATUS	INITIAL DOSE	MAXIMUM DOSE	COST#	SIDE EFFECTS
Alpha-Glucosidase Inhibitor					
Acarbose (Precose)*	F	25 mg tid with first bite of meals. Increase dose to 50mg tid with meals after 4-8 weeks, if necessary.	100 mg tid with meals.	25mg tid \$42 50mg tid \$42 100mg tid \$49	Diarrhea (33%), abdominal pain (21%), flatulence (77%); Serum levels of transaminases increases at doses
Biguanide					
Metformin (Glucophage)*	F	500 mg with breakfast. On the basis of patient's tolerance to metformin and glycemic response, increase dosage by 500 mg/day at weekly intervals, adding a dose at dinner and then at lunch. A dosage of 500mg tid with meals will likely be needed for therapeutic effect.	2550 mg/day	500mg tid \$6 850mg tid \$8	Nausea and diarrhea that usually subside after 3-5 days; may limit rate of dosage increase. Hypoglycemia occurs only if metformin is combined with sulfonylurea or insulin. Teach patient lactic acidosis issues (e.g., muscle aches, weakness).
Meglitinide					
Nateglinide (Starlix)*	NF	120mg tid before meals For patients near HbA _{1c} goal, start 60mg tid ac	120mg tid	60mg tid \$106 120mg tid \$109	Hypoglycemia, URT infections, back pain, dizziness, arthropathy
Repaglinide (Prandin)	NF	For pts not on a hypoglycemic agent or HbA _{1c} < 8%, start with 0.5mg 15 min. before a meal. For pts on hypoglycemic agent or HbA _{1c} ≥8%, start with 1 or 2 mg	16 mg/day	0.5 mg tid \$208 1 mg tid \$209 2 mg tid \$209	Hypoglycemia, URT infections, nausea, diarrhea, constipation, back pain, arthralgia and headache. Contraindicated in type 1 DM, & diabetic ketoacidosis.
Sulfonylurea Agents					
Glipizide (Glucotrol*, Glucotrol XL)*	F	2.5 mg/day	40 mg; give in two doses when dose reaches 15 mg.	2.5mg qd \$4 40mg/day \$15	Hypoglycemia and weight gain
Glyburide (DiaBeta, Micronase)*	F	2.5 mg/day; increase by 2.5 mg weekly if needed	20 mg; give in one or two doses	2.5mg qd \$4 20mg/day \$30	Hypoglycemia and weight gain
Glimepiride (Amaryl)*	F	1-2 mg daily with breakfast or first meal; increase at 1-2 mg increments every 1-2 weeks as needed	8 mg daily	1mg qd \$3 2mg qd \$4 8mg qd \$16	Hypoglycemia and weight gain
Tolazamide (Tolinase)*	NF	100 mg/day	1000 mg; give in two doses when dose reaches 500mg	100 mg qd \$3 1000mg/day \$ 60	Hypoglycemia, jaundice, hematologic abnormalities, GI upset

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Chlorpropamide (Diabinese)*	F	100 mg/day	750 mg; give as single dose	100mg qd \$9 750mg qd \$60	Hypoglycemia, syndrome of inappropriate secretion of antidiuretic hormone (SIADH), GI upset
Tolbutamide (Orinase)*	NF	250 mg/day	3000 mg; give in two or three doses	250mg qd \$10 3000mg/day \$120	Hypoglycemia, jaundice, hematologic abnormalities, GI upset, SIADH
Insulin Human Insulin (Humulin)	F	NPH or Lente 0.1-0.3 units/kg at bedtime or Ultralente before dinner breakfast, or a split dose before breakfast and dinner. If patient has normal or above normal weight, initial dose (in units) =0.1 unit X (fasting BG level-50). If patient is obese, initial dose (in units) =0.1 unit X (fasting BG level-50) X (2.5 X [ABW/DBW -1.5]).		\$59 per 10mL vial	Hypoglycemia and weight gain.
Insulin Aspart (Novolog)	NF	Individualize dose. Give immediately before a meal.		\$117 per 10mL vial	Hypoglycemia and weight gain.
Insulin Glargine (Lantus)	F	On oral antidiabetic agents: 10IU SC qd Switching from NPH: NPH QD → same dose for Lantus qd NPH BID → 20% reduction of same dose for Lantus qd Adjust based on patient's response		\$100 per 10mL vial	Hypoglycemia and weight gain.
Insulin Determir (Levemir)	NF	0.1 to 0.2 units/kg once daily in the evening or 10 units once or twice daily		\$100 per 10mL vial	Hypoglycemia and weight gain.

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Insulin Lispro (Humalog)	F	Individualize dose. Give within 15 minutes before or immediately after a meal.		\$116 per 10mL vial	Hypoglycemia and weight gain.
Insulin Glulisine (Apidra)	F	Individualize dose. Give within 15 minutes before or immediately after a meal.		\$93 per 10mL vial	Hypoglycemia and weight gain.
Thiazolidinediones					
Pioglitazone (Actos)	NF	15-30mg QD For combination with metformin, sulfonylurea, insulin, start 15-30mg QD. For insulin, decrease insulin dose by 10-25%	45mg/day	15mg QD \$161 30mg QD \$246 45mg QD \$267	Increased liver enzymes. Hepatic monitoring every 2 months is recommended; moderate weight gain, edema, mild anemia
Rosiglitazone (Avandia)	NF	4mg QD For combination with metformin, sulfonylurea, start 4mg QD	8mg/day	2mg QD \$79 4mg QD \$117 8mg QD \$212	Limited FDA approved indication, Severe Black Box Warning. Please see Package Insert.

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Combination					
Glyburide/Metformin (Glucovance) *	F	1.25mg/250mg qd-bid with meals, increasing dosage as necessary at 2 week intervals For previously treated patients, start 2.5mg/500mg or 5mg/500mg bid meals	20mg/2000mg daily	1.25/250 BID \$10 2.5/500 BID \$10 5/500 BID \$10	Hypoglycemia, nausea, diarrhea. Contraindicated in patients with renal insufficiency for risk of lactic acidosis.
Rosiglitazone/Metformin (Avandamet)	NF	2mg/500mg bid with meals	8mg/2000mg daily	2/500 QD \$69 2/1000 QD \$69 4/500 QD \$116 4/1000 QD \$116	See Avandia and Glucophage
Pioglitazone/Metformin (Actoplus Met)	NF	15mg/500mg qd	45mg/2550mg daily	15/500 TID \$367 15/850 TID \$367	See Actos and Glucophage
Pioglitazone/Glimepiride (Duetact)	NF	30mg/2mg 30mg/4mg	30mg/4mg 30mg/4mg	30mg/2mg \$246 30mg/4mg \$246	See Actos and Glucophage
Incretin Mimetic					
Exenatide (Byetta)	NF	5mcg	10mcg	5mcg \$243 10mcg \$122	Dose-dependent transient nausea.
Amylin					
Pramlintide (Symlin)	NF	Type 1: 15mcg Type 2: 60mcg	Type 1: 60mcg Type 2: 120mcg	\$51 \$74	Nausea, vomiting, anorexia, headache.
Dipeptidyl peptidase-4 (DPP-4)					
Sitagliptin (Januvia®)	F	100mg once daily	100mg	25mg qd \$203 50mg qd \$203 100mg qd \$203	Stuffy or runny nose, sore throat, upper respiratory tract infection, headache, abdominal pain, nausea, and diarrhea.
Sitagliptin/metformin (Janumet®)	F				
Saxagliptin (Onglyza®)	F	2.5 mg once daily	5mg	2.5mg qd \$203 5mg qd \$203	

F = Formulary NF = Non-formulary DBW = desired body weight ABW = actual body weight * = available generically

#Cost is based on a 30 days' treatment with the lowest recommended dosage, according to MAC or AWP listings in First Data Bank, 10/2011.