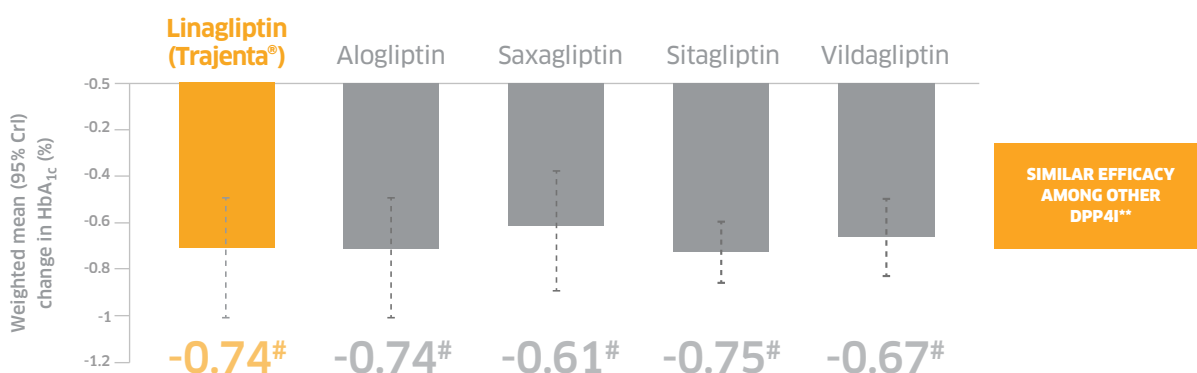


Linagliptin (TRAJENTA®): Proven efficacy for your T2D patients¹⁻³

Relative treatment effect of DPP4i monotherapy vs placebo in meta-analysis of 83 RCTs*³
No head-to-head trial comparison



References

1. Del Prato S, et al. J Diab Compl. 2013;27:274-9.
2. Haak T, et al. Diabetes Obes Metab. 2012;14:565-74.
3. Craddy P, et al. Diabetes Ther. 2014;5:1-41.

Footnotes

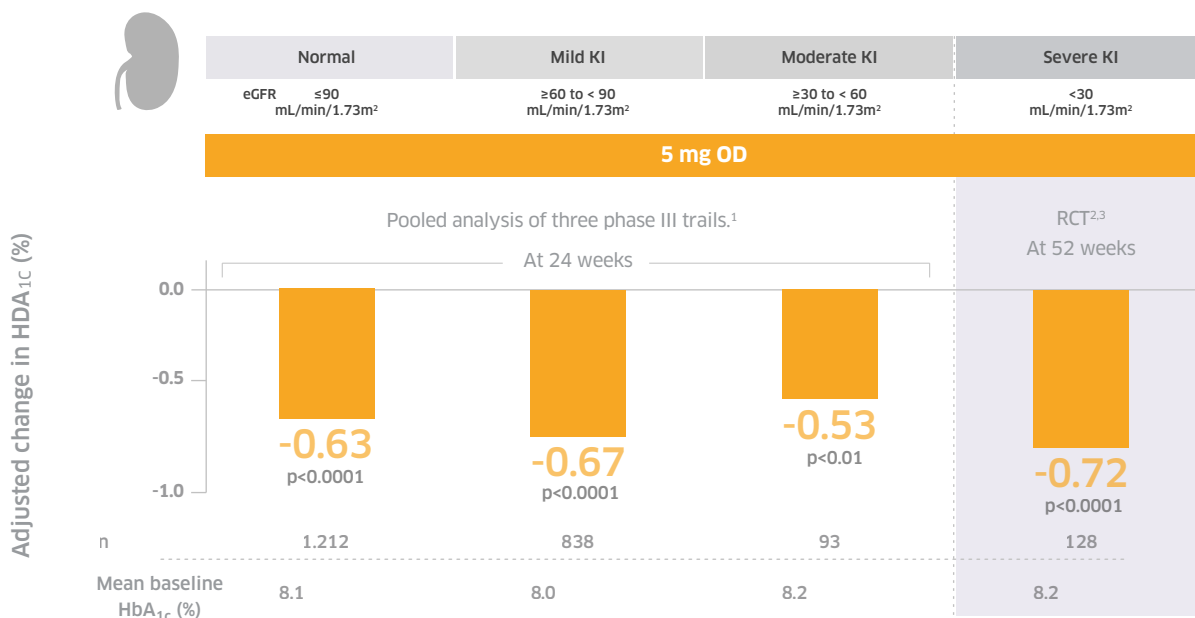
*A systemic review of RCTs, health economic evaluation studies, systemic reviews, and meta-analyses, followed by primary Bayesian mixed treatment comparison meta-analyses and secondary frequent direct comparison meta-analyses using a random effects model to compare the safety and efficacy of DPP4i in patients with T2D and inadequate glycemic control. Outcomes were reported as weighted mean change from baseline, or odds ratio with 95% CrI.

#Statistically significant versus placebo.

**Overlapping 95% credible intervals were predefined as evidence of no difference between treatments.
 BID: Twice daily; CrI: Credible Interval; Met: Metformin; RCT: Randomised controlled trial.

Linagliptin (TRAJENTA®): Proven efficacy with the same dose, regardless of renal function¹⁻³

Adjusted mean HbA_{1c} change vs placebo from baseline by degree of renal impairment (RI)*



References

1. Groop, et al. Diabetes Obes Metab. 2014;16:560-8.
2. McGill J, et al. Diabetes Care. 2013;36:237-44.
3. Linagliptin (TRAJENTA®) PH Prescribing Information. April 2019.



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Document Number: PC-PH-104445
 Production Date: December 2023