



A GLIMPSE AT OPTIMAL T2D MANAGEMENT: ENHANCING OUTCOMES WITH GLP-1 RAS



T2D Management Algorithm based on ADA Recommendations

1	Modifiable behaviors or lifestyle therapy including medically supervised weight loss, is key to managing T2D	<ul style="list-style-type: none"> • Nutrition • Physical activity • Sleep and circadian rhythm • Behavioral support, include alcohol moderation • Smoking cessation
2	Weight loss is a lifelong goal in all patients with T2D and overweight or obesity	<ul style="list-style-type: none"> • Utilize BMI among other weight-related metrics such as waist circumference and central adiposity • Consider ethnic and genetic factors, such as lower BMI • Utilize behavioral interventions and weight loss medications as required to achieve chronic therapeutic goals
3	Glycemic control targets <ul style="list-style-type: none"> - Individualize A1C targets - Include fasting and postprandial glucoses 	<ul style="list-style-type: none"> • One size does not fit all • Stratify choice of therapy based on initial A1C • Minimizing risk of hypoglycemia is a priority
4	Individualize choice of therapies	<ul style="list-style-type: none"> • Consider patient characteristics • Minimize risk of weight gain that can occur even with some T2D therapy regimens • Consider patient's personal preferences • Assess formulary restrictions, etc
5	Consider related comorbidities	<ul style="list-style-type: none"> • Comprehensive management includes CVD therapies (ie. lipid and hypertension management) • Collaborative and multi-disciplinary care includes mental health • Consider patient's family or genetic history for comorbidity risks
6	Choosing a therapy regimen	<ul style="list-style-type: none"> • The therapeutic regimen should be as simple as possible to optimize ease of use • Combination therapy is usually required and should involve agents with complementary actions • Evaluate therapy frequently until stable (ie. Every 3 months initially and then less often)
7	Consider social determinants of health (SDoH)	<ul style="list-style-type: none"> • Recognize and help mitigate barriers to care and access to treatment • Initial acquisition of therapies is only a part of the total cost of care, which includes monitoring and follow-up • Assess impact of net cost to patient
8	Intensify therapy stratified by burden of T2D, obesity and related complications	<ul style="list-style-type: none"> • If therapeutic targets are not met, intensify lifestyle and medication treatment modalities • T2D and obesity are chronic progressive diseases that require commitment to long-term therapy and follow-up