

# PHARMACOECONOMIC ANALYSIS OF INSULIN GLARGINE IN THE TYPE 2 DIABETES IN CLINICAL PRACTICE IN UKRAINE

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**Introduction.** Tight glycaemic control is a mandatory component of diabetes care given proven beneficial effects on the risk of vascular complications. Current guidelines recommend a target for glycated haemoglobin (HbA1c) between 6.5% and 7.5%. Insulin represents the cornerstone of care for achieving this target in patients with type 1 diabetes, and is also indicated in type 2 diabetes patients. In clinical trials in patients with type diabetes, glargine was shown to be more effective than NPH. Glargine is more expensive than NPH.

**Aim of research** – the comparative clinical and economic estimation of insulin analogues glargine (Lantus®) and NPH insulin in routine medical practice in Ukraine.

**Methods of research** - cost-effectiveness analysis. The objects for the clinical and economic evaluation were the results of direct comparative randomized clinical trials IDEAL.

**Results of research.** The study involved 349 patients with type 2 diabetes. 216 patients were treated for 6 months by NPH, 133 patients by insulin glargine (Lantus®). The principal analysis was the change in HbA1c after 6 months treatment with glargine; secondary analysis includes change in total daily insulin dose and number of hypoglycemic episodes. At the end of the study HbA1c levels were in the range of 6.5-7.5% reached 46.3% of patients treated with insulin glargine, and only 21.1% of patients with NPH. The average dose of glargine was  $28,44 \pm 0,71$  IU and NPH insulin IU  $-35,65 \pm 1,37$  IU. The coefficient "cost-effectiveness» (CER) to insulin glargine was 10.7 thousand UAH., for NPH 27.9 thousand UAH.

**Conclusions:** It was found, that Insulin glargine has significant clinical and economic benefits versus NPH insulin in routine medical practice in Ukraine.