Long-acting insulin analogues for diabetes mellitus: meta-analysis of clinical outcomes and assessment of costeffectiveness
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Record Status
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' objectives
"The aim of this systematic review is to evaluate the clinical efficacy and economic implications of long-acting insulin analogues, specifically insulin glargine (IGlar) and insulin detemir (IDet), for the treatment of diabetes mellitus (DM)."
(executive summary)

Authors' conclusions
Implications for Decision Making
Long-acting insulin analogues (LAIAs) have no demonstrated impact on blood sugar control, relative to HI. The available evidence suggests that LAIAs have not demonstrated clinically important differences in glycated hemoglobin, a widely used marker of blood sugar control in types 1 and 2 DM.

Reduced complications from therapy can occur. The evidence suggests IGlar can reduce the risk of severe hypoglycemia in type 1 DM patients taking human insulin. IGlar reduced the risk of nocturnal but not severe hypoglycemia in type 2 DM patients. IDet has demonstrated a reduced risk of severe and nocturnal hypoglycemia in type 1 DM. No reductions in complications with IDet were observed in patients with type 2 DM.

Funding decisions may require more compelling economic evidence. Publicly funding LAIAs will require significant additional investment. Economic arguments for this investment are limited largely because they are based on unproven assumptions about the long-term benefit of therapy.

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