



## Your dose of drug information in between details

Drug information question: What is the effect of increasing the dose of insulin glargine in people with type 2 diabetes?

**Conclusion: The best available evidence indicates that the glucose lowering effect of insulin glargine 100 units/mL plateaus at doses above 0.5 units/kg/day. The largest effect on fasting plasma glucose (FPG) and hemoglobin A1c (HbA1c) occurs at doses  $\leq$  0.3 units/kg/day.**

The BC Provincial Academic Detailing (PAD) Service's June 2019 topic [Basal Insulins for Type 2 Diabetes](#) offered the opportunity to discuss the comparative hypoglycemia risk of basal insulins, clinical considerations and costs.<sup>1</sup> Table 3 addressed the Initiation and Titration of Basal Insulin and included this point: Reassess the pharmacologic plan if basal insulin dose exceeds 0.7 to 1 units/kg/day which was a practice recommendation from the [American Diabetes Association 2019 Guideline](#).<sup>2</sup>

Subsequent to the 2019 PAD topic, a [post-hoc analysis](#) of insulin glargine 100 units/mL in people with type 2 diabetes indicated an even lower maximum useful dose.<sup>3</sup> This analysis used data from three randomized controlled trials (458 participants) and found that insulin glargine doses exceeding 0.5 units/kg/day had a plateauing effect on fasting plasma glucose (FPG) and hemoglobin A1c (HbA1c) but adversely contributed to weight gain. The greatest reduction in FPG and HbA1c occurred at doses  $\leq$  0.3 units/kg/day.

Two diabetes clinical practice guidelines have updated their recommendations regarding basal insulin and dose-response. The [American Diabetes Association 2021 Guideline](#) and the [American Association of Clinical Endocrinologists 2020 Guideline](#) now identify 0.5 units/kg/day as the threshold which should trigger a re-evaluation of basal insulin therapy in people with type 2 diabetes.<sup>4,5</sup>

Members of the PAD team performed a literature search and we did not identify additional randomized control trials examining dose response pertaining to insulin glargine and glargine biosimilars. A search of [Clinicaltrials.gov](#) also did not identify ongoing trials researching this question.

<sup>1</sup>[BC PAD Service 2019 Basal Insulins for Type 2 Diabetes](#); <sup>2</sup>[American Diabetes Association Diabetes Care 2019;42:S90-S102](#); <sup>3</sup>[UMPIERREZ Diabetes Obes Metab 2019 \(PMID: 30724009\)](#); <sup>4</sup>[American Diabetes Association Diabetes Care 2021;44:S111-S124](#); <sup>5</sup>[American Association of Clinical Endocrinologists Endocr Pract 2020 \(PMID: 32022600\)](#)