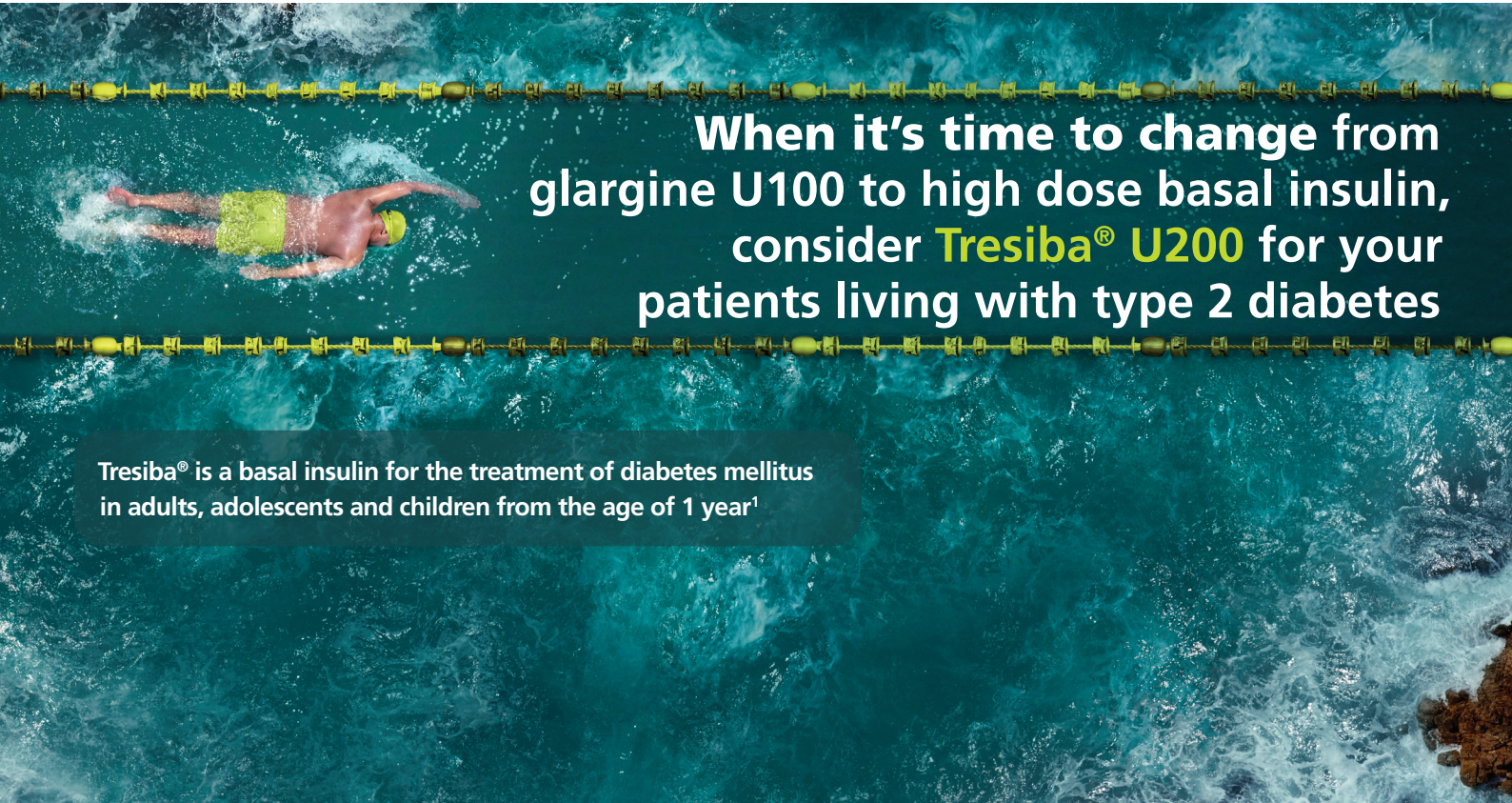
TRESIBA®
insulin degludec

This digital material is intended for UK healthcare professionals.
Click here for prescribing information or refer to the associated PI document.
Please refer to the Summary of Product Characteristics before prescribing.

novo nordisk®



When it's time to change from glargine U100 to high dose basal insulin, consider Tresiba® U200 for your patients living with type 2 diabetes

Tresiba® is a basal insulin for the treatment of diabetes mellitus in adults, adolescents and children from the age of 1 year[1]

Tresiba® reduced nocturnal hypoglycaemia[2]

REDUCTION IN NOCTURNAL HYPOGLYCAEMIA WITH TRESIBA® VS GLARGINE U100[2]

in patients with type 2 diabetes in the SWITCH 2 trial (maintenance period)[2*]

Tresiba® = 55.2 vs glargine U100 = 93.6 episodes per 100 PYE, *P*<0.001

✓ Reduction in nocturnal hypoglycaemia was achieved with equivalent glycaemic control[2]

*Secondary endpoint.

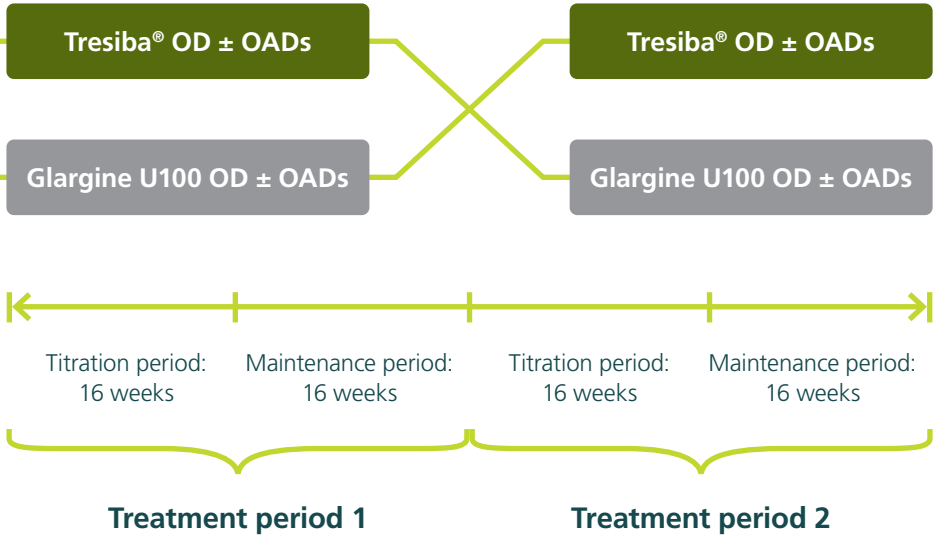
PYE, patient-years of exposure.

For further safety information please refer to the SmPC.

SWITCH 2 trial design[2]

721
adult patients with type 2 diabetes on basal insulin ± OADs* at high risk of hypoglycaemia

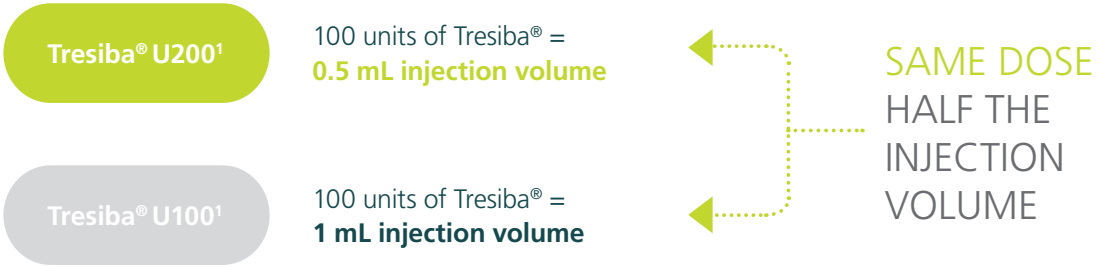
Trial characteristics
- Randomised 1:1
- Double-blind
- Crossover
- Treat-to-target



*For patients previously treated with twice-daily (BID) basal insulin, a 20% dose reduction was applied at randomisation.[2]
In the SWITCH 2 trial, overall hypoglycaemia was defined as severe or blood glucose-confirmed (<3.1 mmol/L [<56 mg/dL]) with symptoms, nocturnal hypoglycaemia was defined as episodes occurring between 00:01 and 05:59 (both inclusive), and severe hypoglycaemia was defined as an episode requiring assistance of another person to actively administer carbohydrate, glucagon, or take other corrective actions, neurological recovery following the return of plasma glucose to normal, or both (ADA definition).[2]
ADA, American Diabetes Association; OAD, oral anti-diabetics excluding sulfonylurea and meglitinides; OD, once daily.

Once-daily Tresiba® U200: same dose at half the injection volume vs Tresiba® U100[1]

Tresiba® U200 delivers a smaller volume of insulin per injection compared with Tresiba® U100[1]



Tresiba® U200 – for patients who may benefit from a low-volume insulin injection[1]

No dose conversion is required when switching from glargine U100 to Tresiba® U200*

1:1 CONVERSION FROM GLARGINE U100 TO TRESIBA U200

The dose counter on the FlexTouch® Pen shows the number of units regardless of strength. Changing patients with type 2 diabetes from glargine U100 to Tresiba® U200, can be done unit-to-unit based on the previous glargine U100 dose followed by individual dosage adjustments.[1]

Unlike glargine U100 and U300 that are not bioequivalent and dose conversion is required[3]

*Close glucose monitoring is recommended during the transfer and in the following weeks. Doses and timing of concurrent rapid-acting or short-acting insulin products or other concomitant antidiabetic treatment may need to be adjusted accordingly. For further safety information please refer to the SmPC.

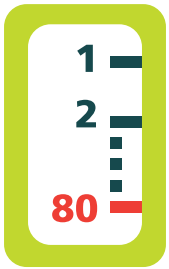
Deliver up to 160 units in a single injection with Tresiba® U200 FlexTouch®[1]

When 80 units in one dose is insufficient to meet your patients' needs, choose Tresiba® U200:[1]

- 2–160 units, in 2 unit increments, in one dose

Tresiba® U100

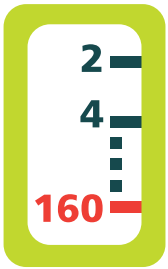
300 units in 3 mL solution[1]



Maximum dose:
80 units

Tresiba® U200

600 units in 3 mL solution[1]



Maximum dose:
160 units

Tresiba® U200 – an option for patients requiring more than 80 units in a single injection[1]

Why choose Tresiba® U200?

- Once-daily subcutaneous administration preferably at the same time every day[1]
- On occasions, when administration at the same time of day is not possible, Tresiba® allows for flexibility in the timing of insulin administration[1]
- A minimum of 8 hours between injections should always be ensured[1]
- There is no clinical experience with flexibility in dosing time with Tresiba® in children and adolescents[1]

Tresiba® provides a real 24 hour, clinically relevant, blood glucose lowering effect, due to its half life of 25 hours. The duration of action is ~42 hours[1]

A higher strength insulin coming in at the same cost per unit as Tresiba® U100*

Acquisition cost only; does not reflect doses used in individual treatment

Insulin	Pack price	Pack size	Cost per unit
Tresiba® FlexTouch® U100 (5 x 3 mL, 100 U/mL)	**£46.60**	**1,500 units**	**£0.031**
Tresiba® FlexTouch® U200 (3 x 3 mL, 200 U/mL)	**£55.92**	**1,800 units**	**£0.031**

Product list prices correct as of April 2021 (prefilled pens only).[4]

Tresiba® U200 – same cost per unit as Tresiba® U100[4]

***Based on entire pack not individual pens.**

Tresiba® longer storage after first opening than glargine U100 and U300[1,2]

Shelf life and storage (prefilled pens only)

Insulin	Shelf life	Storage after first opening (maximum time at ≤30°C)
Tresiba®[1]	**30 months**	**8 weeks**
Glargine U100[5]	3 years	4 weeks
Glargine U300 (SoloSTAR®)[2]	30 months	6 weeks (<30°C)
Glargine U300 (DoubleSTAR®)[2]	24 months	6 weeks (<30°C)

Tresiba® is available in the easy-to-use FlexTouch®[6-9]

Tresiba® FlexTouch® U100:
Up to 80 units in one injection[1]

Tresiba® FlexTouch® U200:
Up to 160 units in one injection[1]

Other prefilled pens extend as dose increases

Tresiba® Penfill® U100 cartridges are also available for use with Novo Nordisk durable insulin pen devices

Easy to use[6-9]

Non-extending dose button and low injection force[9] means it is easy to perform an injection, regardless of dose[6-9]

Confidence in insulin delivery[6-8,10]

End-of-dose click to support patient confidence in accurate dose delivery[6-8,10*]

Preferred by patients and HCPs[6-8]

Over 80% of patients and HCPs preferred to use FlexTouch® vs SoloSTAR®† or KwikPen®[6-8‡]

Preferred = ease of reaching and depressing the push-button, ability to inject low, medium and high doses.

*After the dose display has returned to zero, the needle should be kept under the skin for at least 6 seconds to ensure the full dose is delivered.
†Insulin glargine 100 units/mL.
‡In two usability studies, n=120 and n=160.[6-7]

References: 1. Tresiba® (Summary of Product Characteristics). Bagsvard, Denmark: Novo Nordisk A/S. **2.** Wysham C, et al. *JAMA*. 2017;318(1):45-56. **3.** Toujeo® (Summary of Product Characteristics). Sanofi. **4.** MIMS. Accessed: April 2021. **5.** Lantus® (Summary of Product Characteristics). Sanofi. **6.** Oyer D, et al. *Expert Opin Drug Deliv*. 2011;8(10):1259-1269. **7.** Bailey T, et al. *Curr Med Res Opin*. 2011;27(10):2043-2052. **8.** Bailey T, Campos C. *Expert Rev Med Devices*. 2012;9(3):209-217. **9.** Hemmingsen H, et al. *Diabetes Technol Ther*. 2011;13(12):1207-1211. **10.** Wielandt JO, et al. *J Diabetes Sci Technol*. 2011;5(5):1195-1199.

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