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EFFICACY OF COMBINATION THERAPY WITH SITAGLIPTIN AND METFORMIN IN PATIENTS WITH TYPE 2 DIABETES WHO HAVE NOT REACHED THE TARGET VALUES OF GLYCATED HEMOGLOBIN ON METFORMIN MONOTERPY

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Background and aims: To evaluate the effects of sitagliptin 100 mg in the treatment of participants with type 2 diabetes mellitus who have inadequate glycemic control on metformin ≥1500mg/day. **Materials and methods:** Outpatients aged 52-72 years with type 2 diabetes, that were on metformin monotherapy (=1500 mg/day) for =8 weeks with a A1C =7.5% and =11.0% before treatment with sitagliptin. Glycemic efficacy endpoints were included the changes from baseline in A1C and FPG at week 26, % of Participants Achieving a HbA_{1c} of 7%, changes in body weight, and some safety endpoints such as hepatic safety tests ALT and AST, total and direct bilirubin, renal failure tests. **Results:** Target HbA_{1c} (7%) was achieved in 83.3% overall with no incidence of hypoglycemic episodes. 26 weeks after the initiation of sitagliptin, participants' hemoglobin A1c was significantly decreased by 13.99% ± 0.8%. Furthermore, sitagliptin was well tolerated in the group. Significant decreases of the liver transaminases was observed after 26 weeks of treatment with sitagliptin. Sitagliptin treatment produced a signifiant reduction in GFR was significantly increased by 6,4% ± 2.0, urinary albumin/creatinine ratio was significantly decreased – 106,8%± 1.6. An interesting finding was the significant decrease uric acid levels – 17. 4%±1.7. **Conclusions:** In this study, not only the parameters of diabetes, but also those of liver and kidney tests, uric acid level as an independent predictor of occurrence of cardiovascular diseases were improved by the treatment with sitagliptin. Sitagliptin was effective and safe as combination therapy with metformin in type 2 diabetes patients.