

# **DAROC Clinical Practice Guidelines for Diabetes Care - 2019 Update**

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T2DM is a complex chronic disease. It requires continuous medical care with multifactorial risk reduction strategies. The goals of treatment for diabetes are to prevent or delay complications and maintain quality of life. The cornerstone of treatment of T2DM is the adoption of a healthy diet, increased physical activity and maintenance of a normal body weight. A number of oral and injectable medications are available to help control blood glucose levels. Metformin is well-established and one of the most effective antidiabetic drugs. Sulfonylureas, which increases insulin secretion in T2DM, is also an essential medicine for diabetes. In recent decades, there has been an increasing complexity of medical treatments for diabetes, mostly due to the availability of new drugs and therapeutic classes. Following the long-term use of metformin and sulfonylurea, five additional classes of oral antidiabetic drugs have come into the market: these comprise alpha-glucosidase inhibitors, thiazolidinediones, the non-sulfonylurea insulin secretagogues glinides, dipeptidyl peptidase-4 inhibitors, and sodium-glucose cotransporter 2 inhibitors. Meanwhile, rapid-acting insulin analogues and long-acting insulin analogues have also become widely used due to their improved pharmacokinetic and pharmacodynamic properties. Except for insulin, GLP-1 receptors agonists, an injectable agent also came into Taiwan. These antidiabetic drugs act on different pharmacological mechanisms and have completely different safety profiles, although clinical trials suggest that they have comparable efficacy in terms of their overall glucose lowering effect. The ADA “Standards of Medical Care in Diabetes” recommends a patient-centered approach should be used to guide the choice of pharmacologic agents. Considerations include comorbidities (atherosclerotic cardiovascular disease, heart failure, chronic kidney disease), hypoglycemia risk, impact on weight, cost, risk for side effects, and patient preferences. The updated “DAROC Clinical Practice Guidelines for Diabetes Care” in 2019 provides considerations of several factors for the choice of antidiabetic drugs.