


Type 2 Diabetes and Renal Impairment – Drug Adjustment

For Liraglutide the green box should extend to include 4 (29-15). Add Semaglutide which would also be green up to and including 4 (29-15) and red for 5 (<15).

							Hepatic impairment	
Drug	CKD1 (eGFR >90)	2 (60-90)	3a (59-45)	3b (44-30)	4 (29-15)	5 (<15 or RRT)	Mild-moderate	Severe
Acarbose	✓	✓	✓	✓	✗ eGFR <25 ml/min		✓	✗ Contraindicated
Metformin	✓	✓	✓	✓ (review regularly)	✗		✗ Contraindicated in hepatic insufficiency	
Gliclazide	✓	✓	✓	✓	✓ (use lowest effective dose)	✗	✓	✗ Contraindicated
Sitagliptin	100mg		50mg (GFR <50ml/min)		25mg		✓	✗ Not studied in severe hepatic impairment
Linagliptin	✓	✓	✓	✓	✓	✓	✓ No dose adjustment required, but clinical experience is lacking in hepatic impairment	
Alogliptin	25mg		12.5mg (GFR <50ml/min)		6.25mg		✓	✗ Not studied in severe hepatic impairment
Pioglitazone	✓	✓	✓	✓	✓	✓ (not if dialysis)	✗ Contraindicated	✗ Contraindicated
Lixisenatide	✓	✓	✓ (caution if GFR <50ml/min)		✗		✓	✓
Exenatide	✓	✓	✓	✓ (conservative dose escalation)	✗		✓	✓
Exenatide mr	✓	✓	✓ (not if GFR <50ml/min)	✗		✗		✓
Liraglutide	✓	✓	✓	✓	✗		✗ Not recommended	✗ Not recommended
Dulaglutide	✓	✓	✓	✓	✓	✓ (No data)	✓	✓
Empagliflozin	✓	✓	✗		✗		✓	✓ Start at 5mg & increase to 10mg if well tolerated
Dapagliflozin	✓	✓	✗ (Do not initiate if GFR <60ml/min, max dose 10mg od if GFR persistently falls below 60ml/min after initiation)		✗		✓	✗ Not recommended
Canagliflozin	✓	✓	✗ (Do not initiate if GFR <60ml/min, max dose 100mg od if GFR persistently falls below 60ml/min after initiation)		✗		✓	✗ Not recommended
Insulin	✓	✓	✓	✓	✓ Requirements may be reduced in severe renal impairment. Monitor and adjust dose accordingly		✓ Requirements may be altered in hepatic impairment. Monitor and adjust dose accordingly	

N.B. In patients at extremes of weight ($BMI < 18.5 \text{ kg/m}^2$ or $> 30 \text{ kg/m}^2$) or age ($> 70 \text{ yr}$), calculate renal function using Cockcroft and Gault equation (see calculator available [here](#))