

Class of Medication	Sulfonylurea			Biguanide	Meglitinide	Alpha Glucosidase Inhibitor	Thiazolidinediones		Combination Pills			Incretin Agent			
	DPP – 4 Inhibitor		GLP – 1 Receptor Agonists												
	<i>Glyburide</i> Diabeta Euglucon	<i>Gliclazide</i> Diamicon Diamicon MR	<i>Glimepiride</i> Amaryl	<i>Metformin</i> Glucophage Glumetza	<i>Repaglinide</i> Gluconorm <i>Nateglinide</i> Starlix	<i>Acarbose</i> Glucobay	<i>Pioglitazone</i> Actose	<i>Rosiglitazone</i> Avandia	<i>Avandamet</i> Combination of Rosiglitazone & Metformin	<i>Avandaryl</i> Combination of Rosiglitazone & Glimepiride	<i>Janumet</i> Combination of Sitagliptin and Metformin	<i>Sitagliptin</i> Januvia	<i>Saxagliptin</i> Onglyza	<i>Exenatide</i> Byetta (Injection)	<i>Liraglutide</i> Victoza (Injection)
Maximum Daily Dose	Maximum 20 mg/day	<i>Diamicon</i> Maximum 320 mg/day <i>Diamicon MR</i> Maximum 120 mg/day	Maximum 8 mg/day	<i>Glucophage</i> Maximum 2550 mg/day <i>Glumetza</i> Maximum 2000 mg/day	Gluconorm Maximum 16 mg/day <i>Starlix</i> Maximum 540 mg/day	Maximum 300 mg/day	Maximum 45 mg/day	Maximum 8 mg/day	Maximum 8 mg/2000 mg/day	Maximum 4mg/4mg/day	Maximum 100 mg/ 2000mg/ day	Maximum 100 mg/day	Maximum 5 mg	Maximum 20 µg	Maximum 1.8 mg
Number of daily doses	One to Two	<i>Diamicon</i> One to Two <i>Diamicon MR</i> One	One	One to Four	One to Four	One to Three	One May take up to six weeks before you see an effect	One to Two May take 8 – 12 weeks before you see an effect	Once to twice/day	Once a day	Twice a day	One dose a day	Once a day	Twice a day	Once a day
When to take them	Take 15 – 30 minutes before a meal	Take 0 – 30 minutes before meals	Take with breakfast or first meal of the day	Usually taken with meals	0 – 30 minutes before a meal	Take with first bite of food at meals Start with low dose and gradually increase	Take with or without food Same time everyday	Take with or without food Same time everyday	Usually taken with meals	Usually with meals	Take with meals	Can be taken with or without food	Can be taken with or without food	Anytime within 60 minutes BEFORE your morning meal and evening meal. Do NOT take them AFTER your meal	Anytime of day
Cautions/ Comments	May cause hypoglycemia May cause weight gain	Less hypoglycemia than some sulfonylureas <i>Do not break</i> <i>Diamicon MR</i> <i>Tablet</i>	May cause hypoglycemia	May cause diarrhea, stomach upset Does not cause weight gain Not recommended if there is significant kidney damage	Good at controlling after meal blood glucose levels If you don't eat a meal you don't take the medication May cause hypoglycemia	Bloating, gas & diarrhea are common side effects Does not cause weight gain Does not cause hypoglycemia by itself Not recommended if you have gastrointestinal diseases	May cause fluid retention (puffiness, swelling of feet, shortness of breath) May cause weight gain Not recommended if you are at risk of congestive heart failure Call your doctor if you have any signs of liver disease (nausea, vomiting, stomach pain, lack of appetite, yellowing of skin or eyes, or dark-colored urine) May increase your risk of getting pregnant if your periods are irregular or if you are on birth control pills.		See Rosiglitazone & Metformin & Amaryl Sections		Indicated in combination with Metformin If you miss a dose, take as soon as possible. However, take only 1 dose a day Common side effects – stuffy/runny nose & sore throat Not associated with weight gain	Intended to be used with metformin or a sulfonylurea Take missed dose as soon as you remember but do not take two doses in one day	Your morning and evening meal should be at least 6 hours apart When taking with sulfonylurea to reduce risk of hypoglycemia the sulfonylurea should be decreased when you start taking Byetta. No decrease is needed when taking Byetta with Metformin Byetta slows gastric emptying so you will need to take other medications separately so as not to alter the rate of absorption. If you miss a dose just take your next scheduled dose do not adjust times or amounts and do not take a double dose.	May cause increased heart rate Initial dose of 0.6mg daily for one week then increase to 1.2mg daily for one week then reach 1.8mg if prescribed. Do not use if have history or family history of medullary thyroid cancer or if Multiple endocrine neoplasia syndrome.	