The best treatment options for type 2 diabetes in 2020

CPD QUESTIONNAIRE

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1. Compared to placebo, empagliflozin is associated with a significant 14% reduction in MACE, primarily due to a 38% reduction in the risk of:

☐ **A** Cardiovascular death ☐ **B** Non-fatal MI ☐ **C** Non-fatal stroke

2. Empagliflozin-associated microvascular benefit is driven mainly by a reduction in:

☐ **A** Time to first initiation of retinal photocoagulation ☐ **B** Vitreous haemorrhage
☐ **C** Diabetes-related blindness ☐ **D** Incident/worsening nephropathy

3. The SUSTAIN-6 trial highlighted a significantly worsening incidence of retinopathy in T2DM patients treated with:

☐ **A** Liraglutide ☐ **B** Semaglutide ☐ **C** A and B

4. Post-hoc analysis of retinopathy-associated complications in T2DM shows better outcomes using 25mg empagliflozin compared to a 10mg dose.

☐ **A** True ☐ **B** False

5. The effects of SGLT-2 inhibition on renal outcomes in patients with T2DM and albuminuric chronic kidney disease were examined in:

☐ **A** EMPA-REG OUTCOME ☐ **B** SUSTAIN-6 ☐ **C** CREDENCE ☐ **D** A and C

6. In the CREDENCE trial, all T2DM patients had an eGFR (ml/min/1.73m^2) of between:

☐ **A** 30 and <60 ☐ **B** 45 and <90 ☐ **C** 30 and <90

7. In the CREDENCE trial, all T2DM patients had albuminuria with UACR:

☐ **A** >30-300mg/g ☐ **B** >300-500mg/g

8. The CREDENCE trial was stopped early (median 2.62 years) as the renal benefits emerged in the canagliflozin-treated group.

☐ **A** True ☐ **B** False

9. Compared to placebo, canagliflozin-treated patients participating in CREDENCE had a lower risk of the primary composite outcome of:

☐ **A** End-stage kidney disease ☐ **B** Doubling of serum creatinine level
☐ **C** Death from renal causes ☐ **D** Death from cardiovascular causes
☐ **E** All of the above ☐ **F** A and C

10. The only diabetes drug that is currently registered for treatment of NAFLD is:

☐ **A** Pioglitazone ☐ **B** Insulin ☐ **C** Canagliflozin

11. Over 20 weeks, addition of 10mg empagliflozin to standard treatment in T2DM patients with NAFLD showed:

☐ **A** Reduced liver fat ☐ **B** Improved ALT levels ☐ **C** A and B

12. In PARADIGM-HF, angiotensin-neprilysin benefit for HF was observed after:

☐ **A** 30 days ☐ **B** 60 days ☐ **C** 180 days

13. In EMPA-REG OUTCOME, early HF benefit (within three days) using empagliflozin was seen in patients:

☐ **A** With T2DM ☐ **B** Without T2DM ☐ **C** A and B

14. In T2DM patients with multivessel disease, PCI with drug-eluting stents is associated with better clinical outcomes for death, MI and stroke than CABG.

☐ **A** True ☐ **B** False

15. In T2DM patients who had undergone CABG or PCI with drug-eluting stents, five-year data show a higher rate of death, MI and stroke in those using:

☐ **A** Insulin therapy ☐ **B** Non-insulin therapy

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