

Patient Education Sheet

Oral Medications for Diabetes Management

Who needs to take oral medications to treat diabetes?

Individuals with type 2 diabetes whose blood sugar levels cannot be adequately controlled by lifestyle changes (that is, appropriate food choices, weight loss if necessary, and physical activity) may need to take an oral medication to treat diabetes.

Will I need to take more than one medication?

It is not uncommon to need more than one type of medication to control type 2 diabetes. Your doctor will prescribe the medication(s) that will work best for you.

Are there any side effects from these medications?

Every medication has potential side effects. If you suspect you are having a side effect from your medication, contact your doctor to report this and determine if changes need to be made.

Are there any other considerations?

Some medications are stopped for a short time period before and after tests, procedures, and surgeries. Check with your doctor if you are having any type of procedure done to see if changes need to be made in your medication dose or schedule.

While in the hospital, your physician may order insulin for tighter control of your blood sugars.

What types of oral medications are available to treat diabetes?

There are many classes or types of oral medication available to treat type 2 diabetes. Each class works in a different way to control blood glucose levels. The following chart is a sample of some of the oral medications available. Modification of your diabetes medication may occur while in the hospital depending on your individual condition.

Oral Diabetes Medication

Brand Name	Generic Name	Class & How It Works	Comments
Precose Glyset	acarbose miglitol	Alpha-glucosidase inhibitors Decrease digestion and absorption of carbohydrate in the small intestine to blunt after-meal increase in blood glucose.	Take with first bite of each meal. May cause diarrhea, gas.
Glucophage Glucophage XR Riomet	metformin metformin -extended release metformin (liquid)	Biguanides Decrease production of glucose by the liver.	May cause nausea, diarrhea initially; tolerance generally increases over time. Is not used if kidney function is impaired.
Starlix Prandin	nateglinide repaglinide	Meglitinides Short-acting medicines that increase insulin secretion at meal time.	Take right before meals. May also need to be taken before large snacks: consult with your health care provider.
Amaryl Glucotrol Glucotrol XL Micronase, Diabeta Glynase PresTab	Glimepiride Glipizide Glipizide- long acting glyburide glyburide (micronized)	Sulfonylureas Longer-acting medicines that stimulate the pancreas to secrete insulin.	Do not skip or delay meals; not eating increases the risk of hypoglycemia (low blood sugar).
ACTOS Avandia	pioglitazone rosiglitazone	Thiazolidinediones Increases the body's sensitivity to insulin.	Takes 4-6 weeks to see effects on blood glucose control. Congestive heart failure may be a contra-indication for use.
Januvia	sitagliptin	DPP 4 Inhibitor Increases the level of the gut hormone GLP-1 resulting in increased insulin secretion, decreased liver production of glucose and slowed down gastric emptying	Side effects may include upper respiratory infection, sore throat, diarrhea
Glucovance Avandamet Metaglip Avandaryl DuetAct Janumet	metformin + glyburide metformin + rosiglitazone metformin + glipizide rosiglitazone + glimepiride pioglitazone + glimiperide sitagliptin + metformin	Combination medications These are combination of medications listed above. See notes above regarding how the individual medications work and comments.	

