EMMC Reports on Byetta's Patient Results 11 Months After FDA Approval

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Redwood City, CA (PRWEB) March 30, 2006 -- Amylin Pharmaceuticals and Eli Lilly are the makers of Byetta, www.byetta.com, a federally-approved injectible by prescription only drug that has been in use by our diabetic patients since its release in 2005. Prior to it's release, the most popular option for diabetics was insulin. It still is, but it may not be for long. Exenatide, a protein--and Byetta's active ingredient, was initially found in lizard's saliva (the Gila Monster). The breakthrough finding identified exenatide as a hormone mimicking a human hormone called GLP-1, responsible for stimulating digestion and insulin production, the functions of which are compromised in diabetic patients.

There are 21 Million Americans with diabetes and about 90% of them are Type 2, which is often associated with obesity. What worries experts most is the pre-diabetic epidemic. The United States Department of Health and Human Services reported in April 2004 that there are 41 Million people in the United States who are pre-diabetic (a low level of insulin resistance).

How is Byetta helping resolve this problem?

A trend we are seeing is overweight patients without a diabetes diagnosis seeking Byetta as a weight loss option. While we agree that there are concerns Byetta will be used as a weight loss drug, a use that has not been medically tested, we are taking a new and safe approach. We run a variety of tests (CGMS, C-Peptide & HBAIC) and are finding that their level of insulin resistance warrants a "pre-diabetic" or diabetic diagnosis.

An area of controversy is the actual definition of pre-diabetes. The American Diabetes Association in November of 2003 changed the definition of pre-diabetes to one that indicates fasting glucose numbers between 100-125 mil/per DECL.

At EMMC, a combination of tests is recommended to accurately assess an individual's level of insulin resistance (CGMS, CPeptide and HBAIC). Results of one test alone may not give an accurate assessment of the compromised metabolism.

Eleven months later, Byetta is meeting our expectations for better glucose control and weight loss in Type 2 Diabetics. While you may have read that Byetta can cause low blood sugar episodes (hypoglycemia) our patient population is reporting this side effect in small numbers. To date, Byetta is giving patients better blood sugar control (indicated by CGMS Values) and is stil less likely to cause low blood sugar when compared to insulin. Approximately 20% of our patients report Byetta cause them to feel nausea. For some of them, it subsides, but for others, the side effect of nausea will persist, making Byetta a poor choice for them. The majority of our patients are losing weight and when the scale does not indicate it, measurements indicate they are losing inches. Many of our patients report having more energy and strength than they have had in years. Another benefit of this weight loss is that it reduces risks of other diabetic complications (high blood pressure, blindness, neuropathy, kidney failure, etc.) contributing to overall well-being.

Other versions of Byetta are currently being tested, including one to be used only once a week, a nice contrast

to the current twice daily injection.

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