



74th Scientific Sessions, American Diabetes Association

June 13–17, 2014 San Francisco, CA, USA *Pre-congress overview slides*



This is an interactive PDF.

You can click any text in the table of contents to open the corresponding page, and the navigation bar at the top of each page helps you to get to the start of any desired section. The home button takes you to the table of contents.

This document represents proposals for discussion purposes by Management. Strategies / Concepts / Projects described herein may need significant modifications before implementation and no project should be considered final until it has been fully approved by the appropriate review process at Novartis. Novartis will only implement programs that are fully consistent with all applicable laws and regulations as well as Novartis' policies. Before local implementation you must ensure compliance with all applicable laws and regulations, including local industry codes as well as local Novartis companies' policies.



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Key Competitor Presentations			
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ADA General Information

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Main Contacts





Main Contacts					
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Main Contacts – Third Party





Novartis Third Party Ag	ency Contacts		
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Overview



Official Title: 74th Scientific Sessions,

American Diabetes Association

URL: www.professional.diabetes.org

Date: June 13–17, 2014

Location: San Francisco, CA, USA

Venue:

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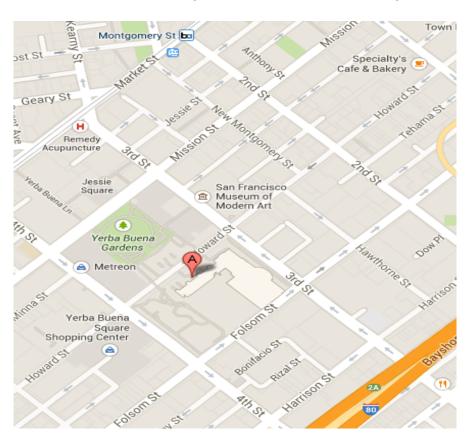
Moscone Center, 747 Howard St,

San Francisco, CA 94103, USA

Link to Moscone Center website

Contact: +1 415 974 4000

Click below to explore an interactive map

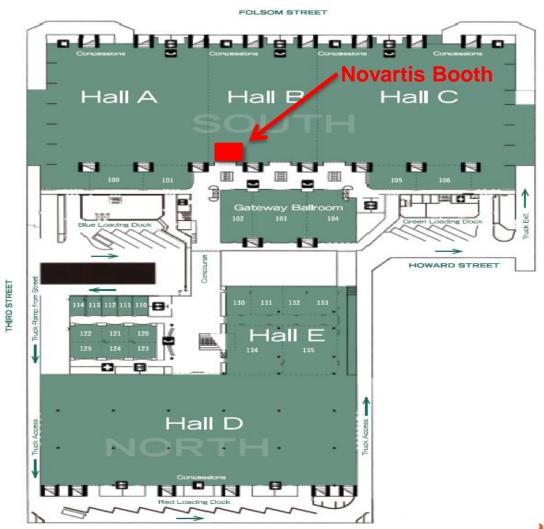




Congress Center – Exhibition Halls Map







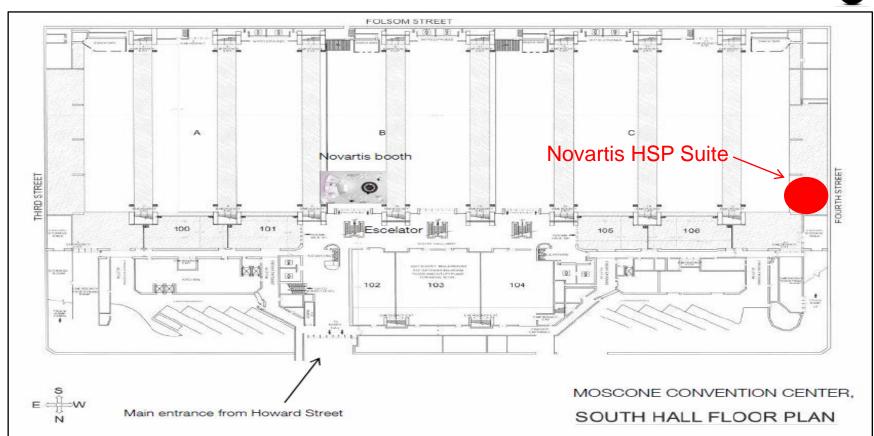


Contents

Congress Center - Exhibition Halls Map







The main entrance to the **Congress Center** is **Moscone South** located in 747 Howard St, San Francisco, CA 94103, USA Please enter the **south lobby** and take the escalator down to the exhibition hall to reach the Novartis booth: 1607



Main Novartis Hotel





Address:

55 Cyril Magnin St, San Francisco, CA 94102, USA

Tel:

+1 800 595 0507

+1 415 392 8000

URL:

www.parc55hotel.com





Congress Programme at a Glance



Thursday, June 12, 2014	15.00 – 19.00	Registration Open
Thursday, Julie 12, 2014	15.00 – 19.00	Shop Diabetes Store Open
	09.00 – 18.30	Registration Open
	09.00 – 18.30	Shop Diabetes Store Open
Friday, June 13, 2014	11.45 – 13.30	Meet the Expert Sessions
	14.00 – 18.15	Sessions
	19.30 – 22.00	Opening Reception - Asian Art Museum (Ticketed Event)
	07.30 – 18.30	Registration Open
	07.30 - 18.15	Shop Diabetes Store Open
	08.00 - 18.00	Sessions
Saturday, June 14, 2014	10.00 – 16.00	Exhibit Hall Open
	10.00 – 18.00	Poster Hall Open
	18.15 – 19.15	Networking Reception - Moscone Center (West Building)
	18.15 – 20.15	Novartis Diabetes Scientific Symposium
	06.30 – 19.20	5K @ ADA Fun Run/Walk
O	07.30 – 17.00	Registration Open
Sunday, June 15, 2014	07.30 – 18.45	Shop Diabetes Store Open
Wear RED to Stop Diabetes®	07.30 – 18.30	Poster Hall Open
Diabetes®	08.00 - 18.30	Sessions
	10.00 - 16.00	Exhibit Hall Open
	07.30 – 16.00	Registration Open
	07.30 – 18.45.	Shop Diabetes Store Open
Monday, June 16, 2014	07.30 – 14.00	Poster Hall Open
	08.00 - 18.30	Sessions
	10.00 – 14.00	Exhibit Hall Open
	07.15 – 10.30	Registration Open
Tuesday, June 17, 2014	07.15 – 12.00	Shop Diabetes Store Open
	07.30 – 11.45	Sessions



Reporting Obligations for US HCP Related Spend





Under the US Sunshine Act all cross-border payments from Novartis Pharma AG to US-licensed physicians (regardless of country of residence) and Teaching Hospitals must be recorded as of August 1, 2013. This requirement comes on top of all other applicable global and local compliance requirements (NP4, FMV etc.).

Implication for this congress:

If you are employed by Novartis Pharma AG and invite a physician to a meal you always need to:

- 1. Check and ask whether the physician has an active license to practice in the U.S.
- Properly inform the physician <u>before</u> the meal (or other transfer of value) that Novartis Pharma AG
 will record and report to the US Government the respective spend, essentially by explaining the
 content of the consent form attached in Appendix 2.
- 3. Document* the advance notice to the physician. If the physician participates at the meal after having been properly informed about the spend reporting, this means that that he/she consented.
- 4. Fill in the physician spend reporting sheet in Appendix 1 and send it to philipp.ferfer@novartis.com.

*documentation is possible in 2 ways:

- a) Writing (preferred): Ask the physician to complete the <u>consent form for disclosure of meals/other transfers of value</u>. *Or*
- b) Orally: Confirm the following in the comment field of the <u>physician spend reporting sheet</u>: "I herewith confirm that I have informed [first name, family name] on [date] at [time] in [city] that Novartis will record and report to the US Government the spend for our [meal/transfer of value] held on [date]."



Disclosure/Dispute Handling



Physicians might ask how they can get the information that will be reported, or whether they can request corrections. Physicians have this right from a privacy perspective.

Here are the respective answers from CMS (Centers for Medicare & Medicaid Services), which will publish the data:

Will CMS notify physicians and teaching hospitals that applicable manufacturers or applicable GPO's reported data about them?

Physicians, teaching hospitals, and physician owners or investors will receive a general notification when the reported information is ready for review. However, the physician, teaching hospital, and physician owners or physician investors will only receive this notification if they have previously registered with CMS. We encourage physicians, teaching hospitals, and physician owners or physician investors to register to allow for notification. Additionally, CMS will utilize a general online posting (http://go.cms.gov/openpayments) and notifications on CMS' listserve(s). (FAQ8147)

When can covered recipients and physician owners or investors initiate a dispute?

Covered recipients and physician owners or investors may initiate disputes at any time after the 45 day review and correction period begins, but before the end of the calendar year. Note that any changes resulting from disputes initiated after the 45 day review period may not be made until the next time the data is refreshed. If a dispute is not resolved by 15 days after the end of the 45 day period, we will report the applicable manufacturer or applicable GPO's version of the payment or other transfer of value (or ownership or investment interest), but will mark it as disputed. (FAQ8268)

Source: https://questions.cms.gov/faq.php





Novartis Itinerary

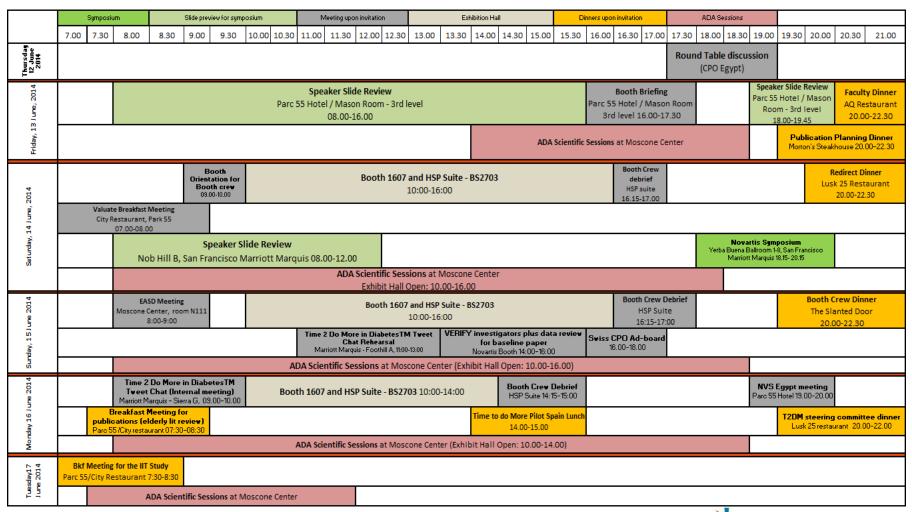
ADA at a Glance

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ADA at a Glance









Novartis Key Events

Novartis Diabetes Scientific Symposium	17
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Novartis Diabetes Scientific Symposium





Symposium Title

Destination diabetes: exploring the pathways and junctions of the T2DM patient journey

Chair

Stefano Del Prato, University of Pisa, Pisa, Italy *Date and Time*Saturday, 14 June 2014; 18:15–20:15

Place

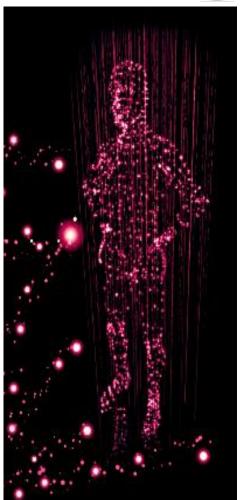
Yerba Buena Ballroom, 1–8 San Francisco Marriott Marquis Hotel

Programme description:

Using an interactive approach, this symposium will explore the physician and patient journey through crossroads of type 2 diabetes mellitus progression, providing attendees with an understanding of clinical inertia as a barrier to achieving therapeutic goals. Expert faculty, including Stefano Del Prato (Italy), Matthias Blüher (Germany) and Chantal Mathieu (Belgium), will discuss evidence-based assessment of current treatment approaches and personal insights from clinical practice.

Delegates are required to wear their official conference badge to gain entry to the symposium.

THE SYMPOSIUM IS OPEN TO NON-US HEALTHCARE PROFESSIONALS ONLY





Agenda



Destination diabetes: exploring pathways and junctions of the T2DM patient journey

Programme

Welcome and introduction

Stefano Del Prato - University of Pisa, Pisa, Italy

Clinical challenges, expert opinion and discussion

Clinical junction 1: Elderly patients with co-morbidities and individual needs

Stefano Del Prato – University of Pisa, Pisa, Italy

Clinical junction 2: Patients in whom metformin monotherapy is failing

Chantal Mathieu - Katholieke Universiteit Leuven, Leuven, Belgium

Clinical junction 3: Newly diagnosed patients

Matthias Blüher – University Hospital Leipzig, Leipzig, Germany

Closing remarks and Q&A

Stefano Del Prato - University of Pisa, Pisa, Italy



Novartis Booth













Adverse events reporting forms will be available at the booth. To view click here.

Date:

Saturday, June 14 (10.00-16.00) Sunday, June 15 (10.00-16.00) Monday, June 16 (10.00-14.00)

Venue:

Booth 1607 Hall B, Moscone South

Booth Crew Briefing*:

Friday, 13 June, 2014
Parc 55 Hotel / Mason Room
3rd level
16.00-17.30

Booth Crew Dinner*:

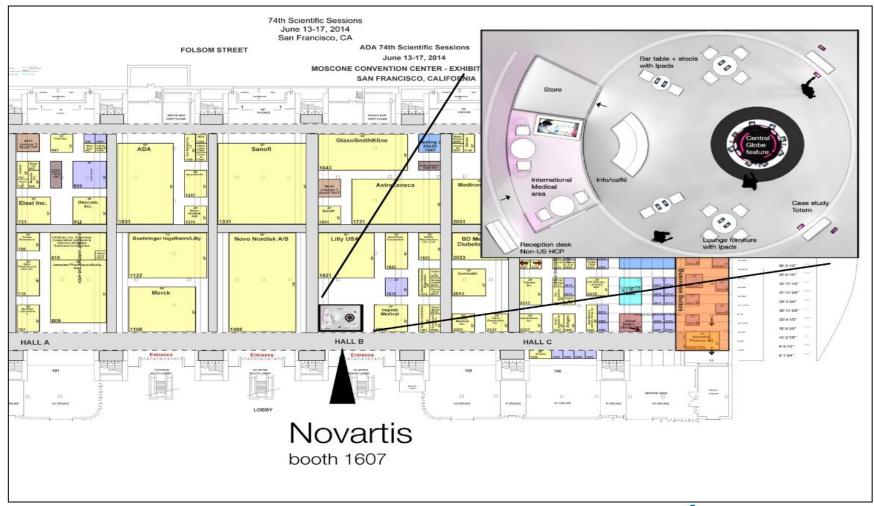
Sunday, 15 June, 2014 The Slanted Door 19.45-22.30

*by invitation only



Booth Layout







Novartis Twitter Handle at ADA





16 June

NOVARTIS TWITTER HANDLE AT ADA



Social Media Objectives:

- Increase engagement with key stakeholders, including media, physicians and people with type 2 diabetes
- Drive traffic to Novartis booth and activities at ADA
- Build upon existing relationships and forge new ones with influencers and key stakeholders

Twitter Editorial Calendar at ADA

Twitter editorial calendar for congress previews and builds anticipation around core Novartis activities:

- Symposium
- Booth
- Time 2 Do More in Diabetes[™] Tweet Chat

The hashtags #2014ada and #Time2DoMore will be used to enable followers to monitor Novartis activities at ADA



Time 2 Do More in Diabetes™ Tweet Chat



16 June

NOVARTIS TWITTER HANDLE AT ADA



Venue: Online via ADA/Novartis Twitter handle

Time: 09.00-10.00, June 16, 2014

The "chat" will be a moderated discussion on Twitter that will enable delegates at ADA and offsite medical experts, physicians, patient advocacy groups and people with diabetes to submit questions and receive answers about the white papers from two members of the Time 2 Do More in Diabetes steering committee, Sir Michael Hirst and Dr. David Strain.

Sample Topics for Discussion

The session will provide a forum to discuss the programme and white papers. Conclusions from the white papers call for:

- Physicians and people with type 2 diabetes to work as a team
- Realistic, shared goals to achieve treatment objectives
- Individualization of treatment
- Purchasers and providers to incentivize good management earlier

#2014ada

#Time2DoMore



Sir Michael Hirst, President, International Diabetes Federation



Dr. David Strain, Senior Clinical Lecturer, University of Exeter, Exeter, UK



Hospitality Suite



14-16 June

HOSPITALITY SUITE



Venue: Moscone Center, Room # BS2703

Time: 14–16 June

The hospitality suite is a dedicated space to conduct 1 on 1 conversations or small meetings with your medical experts throughout the congress. Please note that the suite will be offered on a first come, first served basis.

Internet (for a maximum of 10 simultaneous accesses) will be provided for the entire period of the congress. No food and beverages will be provided.

In order to access the room you will be asked to provide a business card together with an ID. External participants will only be admitted if accompanied by a Novartis representative.

Hospitality Suite Timings					
Saturday, 14-Jun-2014	10:00–16:00				
Sunday, 15-Jun-2014	10:00–16:00				
Monday, 16-Jun-2014	10:00–14:00				





Key Vildagliptin Presentations

Key Vildagliptin Presentations: Novartis	25
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Key Vildagliptin Presentations: Novartis





Date	Session time	Туре	Number	Title	Authors
14 Jun	11:30–13:30	Poster	1293 P	Pregnancy Outcomes After Exposure to Vildagliptin	C. McNeill et al.
15 Jun	12:00–14:00	Poster	1028 P	No Significant Difference in Risk of Heart Failure Hospitalization with the DPP-4 Inhibitor Vildagliptin in Diabetic Patients with Systolic Chronic Heart Failure: Analysis of the Vildagliptin in Ventricular Dysfunction Diabetes Trial (VIVIDD)	H. Krum et al.
15 Jun	12:00–14:00	Poster	1058 P	Vildagliptin as an Add-on Therapy to Insulin Improves Glycemic Control Without an Increased Risk of Hypoglycemia: A Dedicated Asian Study, in a Predominantly Chinese Population	G. Ning et al.

Туре	Number	Title	Authors
	2224 PO	VIRTUE Study: Effects of Vildagliptin Relative to Sulphonylureas Either as Monotherapy or in Combination with Metformin in Muslim Patients with Type 2 Diabetes Fasting During Ramadan	I. Shaltout et al.
Publication	2225 PO	Frequency of Hospitalization for Hypoglycemia and of All Emergency Calls in T2DM Patients Exposed to Vildagliptin vs. Insulin-Secretagogues: An Analysis of the National French Health-Insurance Database	S. Dejager et al.
Only	2257 PO	How Are Elderly Patients with Type 2 Diabetes and Renal Disease Managed?	A. Penfornis et al.
	2410 PO	Effectiveness and Safety of Vildagliptin Compared with Other OADs in T2DM Patients: Results from a 1-Year Observational Study (EDGE) in Europe	C. Mathieu et al.



Key Vildagliptin Presentations: Non-Novartis



Date	Session time	Туре	Number	Title	Authors
15 Jun	12:00–14:00	Poster	1024 P	Comparative Study of Three DPP-4 Inhibitors, Namely Sitagliptin, Vildagliptin, and Alogliptin, in Japanese Type 2 Diabetic Patients: The COSVA Randomized, Controlled Trial	M. Takihata et al.
15 Jun	12:00–14:00	Poster	1091 P	Adding the Combination Drug of Mitiglinide and Voglibose to Vildagliptin Results in Less Glucose Excursions than Adding Glimepiride in Patients with Type 2 Diabetes	K. Fujimoto et al.
15 Jun	12:00–14:00	Poster	1058 P	Comparison of Vildagliptin and Glimepiride: Effects on Glycemic Control, Fat Tolerance, and Inflammatory Markers in People with Type 2 Diabetes	P. Maffioli et al.
16 Jun	12:00–14:00	Poster	1752 P	Effects of Long-term Vildagliptin on Insulin Synthesis and Seretion in ß-Cell-specific Autophagy Deficient Mice	E. Roh et al.





Key Competitor Presentations

Competitor Presentations (Sun, June 15, 2014)	28
Competitor Presentations (Mon. June 16, 2014)	32







Time	Туре	Title	Drug	Company	
Monday, June 15, 2014					
8:15–8:30	Oral Presentation	Oral Glucose Lowering with Linagliptin Plus Metformin Is a Viable Initial Treatment Strategy in Patients (pts) with Newly Diagnosed Type 2 Diabetes (T2D) and Marked Hyperglycemia	Linagliptin	BI/Lilly	
8:30–8:45	Oral Presentation	Long-term Effects of Metformin and Sitagliptin on Near-Normoglycemic Remission, B-Cell Function, and Insulin Sensitivity in Obese African Americans with Hyperglycemic Crises	Sitagliptin	Academic	
9:45–10:00	Oral Presentation	TTP054, a Novel, Orally-Available Glucagon-like Peptide-1 (GLP-1) Agonist, Lowers HbA1c in Subjects with Type 2 Diabetes Mellitus (T2DM)	TTP054	TransTech	
9:30–9:45	Oral Presentation	TTP273, an Orally-Available Glucagon-like Peptide-1 (GLP-1) Agonist, Notably Reduces Glycemia in Subjects with Type 2 Diabetes Mellitus (T2DM)	TTP273	TransTech	
12:00–14:00	Poster	The INITIATOR Study: Real-World Treatment Patterns and Outcomes in Patients with Type 2 Diabetes Mellitus (T2DM) Initiating Insulin Glargine (GLA) or Liraglutide (LIRA)	Liraglutide	Academic	
12:00–14:00	Poster	Efficacy and Safety of Once Weekly Dulaglutide vs. Once Daily Liraglutide in Type 2 Diabetes (AWARD-6)	Dulaglutide	Lilly	
12:00–14:00	Poster	Efficacy and Tolerability of ITCA 650 (Continuous Subcutaneous Exenatide) in Poorly Controlled Type 2 Diabetes with Baseline A1C>10%	ITCA 650 Exenatide QM	Intarcia	
12:00–14:00	Poster	Effectiveness and Tolerability with Liraglutide among Patients with Type 2 Diabetes: Two-Year Data from EVIDENCE: A Prospective, Follow-up, Post-marketing Study	Liraglutide	Academic	
12:00–14:00	Poster	Beneficial Effects of Liraglutide in Type 1 Diabetes	Liraglutide T1D	Academic	
12:00–14:00	Poster	Safe and Effective Use of the Single-Use Pen for Injection of Once-Weekly Dulaglutide in Injection-Naive Patients with Type 2 Diabetes	Dulaglutide	Lilly	
12:00–14:00	Poster	Factors Associated with Progression of Type 2 Diabetes and Impact of Treatment with Saxagliptin in the SAVOR-TIMI 53 Study	Saxagliptin	AZ	
12:00–14:00	Poster	Dual Add-On Therapy in Poorly Controlled Type 2 Diabetes on Metformin: Randomized, Double-Blind Trial of Saxagliptin+Dapagliflozin vs. Saxagliptin and Dapagliflozin Alone	Saxagliptin+ dapagliflozin	AZ	







Time	Туре	Title	Drug	Company	
Monday, June 15, 2014					
12:00–14:00	Poster	A Novel, Once-Weekly Oral DPP-4 Inhibitor Trelagliptin: A Phase 3, Double-Blind, Noninferiority Study in Japanese T2DM Patients	Trelagliptin	Takeda	
12:00–14:00	Poster	Fixed Dose Combinations of Empagliflozin/Linagliptin for 24 Weeks in Drug-Naive Patients with Type 2 Diabetes (T2DM)	Empagliflozin/ Linagliptin FDC	BI/Lilly	
12:00–14:00	Poster	Fixed-Dose Combinations of Empagliflozin/Linagliptin for 24 Weeks as Add-On to Metformin in Patients with Type 2 Diabetes (T2DM)	Empagliflozin	BI/Lilly	
12:00–14:00	Poster	Risk of New Onset Heart Failure in Patients Using Sitagliptin	Sitagliptin	Academic	
12:00–14:00	Poster	Risk of Hypoglycemia in People Receiving Linagliptin: Pooled Data from 1,489 Adults Aged = 65 Years with Type 2 Diabetes Mellitus (T2DM)	Linagliptin	BI/Lilly	
12:00–14:00	Poster	Comparative Study of Three DPP-4 Inhibitors, Namely Sitagliptin, Vildagliptin, and Alogliptin, in Japanese Type 2 Diabetic Patients: The COSVA Randomized, Controlled Trial	Sitagliptin, Alogliptin	Academic	
12:00–14:00	Poster	Long-term Efficacy and Safety of Linagliptin in Type 2 Diabetes Patients with Moderate to Severe Renal Disease	Linagliptin	BI/Lilly	
12:00–14:00	Poster	Efficacy and Safety of Linagliptin as Add-on to Basal Insulin in Patients with Type 2 Diabetes and Renal Impairment	Linagliptin	BI/Lilly	
12:00–14:00	Poster	Incidence of Fractures in Patients with Type 2 Diabetes in the SAVOR-TIMI 53 Trial	Saxagliptin	AZ	
12:00–14:00	Poster	Empagliflozin (EMPA) Has No Discernable Effect on Muscle Sympathetic Nerve Activity (MSNA) in Patients with Type 2 Diabetes (T2DM) Despite Reductions in Blood Pressure (BP) and Weight	Empagliflozin	BI/Lilly	
12:00–14:00	Poster	Diuresis-related Safety and Tolerability of Dapagliflozin (DAPA) in T2DM Over 24 Weeks	Dapagliflozin	AZ	
12:00–14:00	Poster	Long-term Renal Safety with Dapagliflozin Treatment	Dapagliflozin	AZ	







Time	Туре	Title	Drug	Company
		Monday, June 15, 2014		
12:00–14:00	Poster	Alogliptin Superior to Glipizide in Composites of A1C Reduction, No Hypoglycemia, and No Weight Gain in Patients with T2DM	Alogliptin	Takeda
12:00–14:00	Poster	Sodium Glucose Co-Transporter-2 (SGLT2) Inhibitor Empagliflozin (EMPA) in Type 1 Diabetes (T1D): Impact on Diurnal Glycemic Patterns	Empagliflozin- T1D	BI/Lilly
12:00–14:00	Poster	Empagliflozin (EMPA) for ≥ 76 Weeks as Add-on to Pioglitazone With or Without Metformin in Patients with Type 2 Diabetes (T2DM)	Empagliflozin	BI/Lilly
12:00–14:00	Poster	Efficacy and Safety of Saxagliptin in Older Participants in the SAVOR-TIMI 53 Trial	Saxagliptin	AZ
12:00–14:00	Poster	Efficacy and Cardiovascular (CV) Safety of Linagliptin as Add-on to Insulin in Type 2 Diabetes (T2D) A Pooled Comprehensive Post-hoc Analysis	Linagliptin	BI/Lilly
12:00–14:00	Poster	Safety and Tolerability of Linagliptin and Metformin in Combination for Patients with Type 2 Diabetes Mellitus (T2DM)	Linagliptin	BI/Lilly
12:00–14:00	Poster	Empagliflozin (EMPA) for ≥76 Weeks as Add-on to Metformin in Patients with Type 2 Diabetes (T2DM)	Empagliflozin	BI/Lilly
12:00–14:00	Poster	Dapagliflozin (DAPA) Reduces HbA1c in Asian Patients with T2DM after Metformin (MET) Failure	Dapagliflozin	AZ
12:00–14:00	Poster	Empagliflozin (EMPA) for ≥76 Weeks as Add-on to Metformin Plus Sulfonylurea (SU) in Patients with Type 2 Diabetes (T2DM)	Empagliflozin	BI/Lilly
12:00–14:00	Poster	Effect of Canagliflozin (CANA) in Patients with Type 2 Diabetes Mellitus (T2DM) Who Were, or Were Not, on Antihyperglycemic Agents (AHAs) at Screening	Canagliflozin	J&J
12:00–14:00	Poster	Efficacy and Safety of Empagliflozin (EMPA) in Younger, Overweight/Obese Patients with Type 2 Diabetes (T2DM) with HbA1c >8%	Empagliflozin	BI/Lilly
12:00–14:00	Poster	Absorption, Metabolism, and Excretion of [14C]Omarigliptin, a Once-Weekly DPP-4 Inhibitor, in Humans	Omarigliptin	Merck







Time	Туре	Title	Drug	Company	
	Monday, June 15, 2014				
12:00–14:00	Poster	Safety of Linagliptin in 8,778 Patients with Type 2 Diabetes Mellitus: Pooled Analysis of 23 Placebo-Controlled, Randomized Clinical Trials	Linagliptin	BI/Lilly	
12:00–14:00	Poster	A Randomized, Double-Blind, Placebo-Controlled, Phase II Clinical Trial to Investigate the Efficacy and Safety of Oral DA-1229 in Patients with Type 2 Diabetes Mellitus Who Have Inadequate Glycaemic Control with Diet and Exercise	DA-1229	Dong-A	
12:00–14:00	Poster	Effect of Canagliflozin (CANA) on Liver Function Tests (LFTs) in Patients with Type 2 Diabetes Mellitus (T2DM)	Canagliflozin	1&1	
12:00–14:00	Poster	Long-term Efficacy and Safety of Dapagliflozin in Patients with Type 2 Diabetes, Cardiovascular Disease, and Hypertension	Dapagliflozin	AZ	
12:00–14:00	Poster	Efficacy and Safety of Once Daily Remogliflozin Etabonate for the Treatment of Type 2 Diabetes	Remogliflozin	Islet Biosciences	
12:00–14:00	Poster	Efficacy and Safety of Twice Daily Remogliflozin Etabonate for the Treatment of Type 2 Diabetes	Remogliflozin	Islet Biosciences	
12:00–14:00	Poster	The Cost-Effectiveness of Canagliflozin (CANA) vs. Sitagliptin as an Add-on to Metformin (MET) in the Treatment of Type 2 Diabetes Mellitus (T2DM) in the U.S.	Canagliflozin	J&J	
12:00–14:00	Poster	Real-World Comparative Effectiveness of Exenatide Once Weekly and Liraglutide in Patients with Type 2 Diabetes Mellitus	Liraglutide	Novo	
12:00–14:00	Poster	Association of Individual and Composite Risk Factor Control in Diabetes with Future Cardiovascular Disease Event Risk	CV outcomes	Academic	
12:00–14:00	Poster	Results of the Albiglutide HARMONY Program Prospective Major Adverse Cardiovascular Event (MI, Stroke, Cardiovascular Death, and Unstable Angina) Meta-analysis	Albiglutide	GSK	
12:00–14:00	Poster	Characterization of Sitagliptin Use in Patients with Type 2 Diabetes and Chronic Renal Disease	Sitagliptin	Merck	





Time	Туре	Title	Drug	Company	
	Monday, June 16, 2014				
09.15–09.15	Oral Presentation	Improvement in Glycemic Control and Reduction in Body Weight over 52 Weeks with Dapagliflozin as Add-on Therapy to Metformin plus Sulfonylurea	Dapagliflozin	AstraZeneca	
08.15–08.15	Oral Presentation	Empagliflozin (EMPA) Monotherapy for ≥76 Weeks in Drug-Naive Patients with Type 2 Diabetes (T2DM)	Empagliflozin	BI/Lilly	
08.45–09.00	Oral Presentation	Empagliflozin (EMPA) Compared with Glimepiride (GLIM) as Add-on to Metformin (MET) for 2 Years in Patients with Type 2 Diabetes (T2DM)	Empagliflozin	BI/Lilly	
09.15–09.15	Oral Presentation	Predisposing Factors for Hypoglycemia: Analysis from the SAVOR-TIMI 53 Trial	Saxagliptin	AstraZeneca	
15.00–15.15	Oral Presentation	Harmony 3 Year 3 Results: Albiglutide vs. Sitagliptin and Glimepiride in Patients with T2DM on Metformin	Albiglutide+ sitagliptin	GSK	
15.15–15.30	Oral Presentation	Efficacy and Safety of Once-Weekly Dulaglutide vs. Insulin Glargine in Combination with Metformin and Glimepiride in Type 2 Diabetes Patients (AWARD-2)	Dulaglutide	Lilly	
15.30–15.45	Oral Presentation	Efficacy and Safety of Liraglutide vs. Placebo When Added to Basal Insulin Analogs in Patients with Type 2 Diabetes (LIRA-ADD2BASAL)	Liraglutide	Novo Nordisk	
15.45–16.00	Oral Presentation	Benefits of a Fixed-Ratio Formulation of Once-Daily Insulin Glargine/Lixisenatide (LixiLan) vs. Glargine in Type 2 Diabetes (T2DM) Inadequately Controlled on Metformin	Lixisenatide	Sanofi	

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