SPARK THE MOTIVATION



FOR CHANGE

Help your T2DM patients to start and stay on once-weekly Trulicity



Choose Trulicity as 1st Injectable with All-round Benefits



Powerful HbA1c reduction1,*



Proven CV benefit in patients with or without established $CVD^{2,3,\dagger}$



Simple once-weekly dosing in a ready-to-use pen with hidden needle^{1,4,5}



Better adherence shown in real-world studies vs. other GLP-1 RAs^{6,7,‡}

- * Trulicity 1.5 mg demonstrated statistically superior HbA1c reduction in patients with type 2 diabetes in 8 phase III clinical trials vs metformin, sitagliptin, exenatide BID, insulin glargine, and/or placebo. Trulicity 1.5 mg demonstrated noninferior HbA1c reduction vs liraglutide 1.8 mg, as well as noninferiority vs insulin glargine in patients with type 2 diabetes and CKD¹.
 † Trulicity 1.5 mg significantly reduced the risk of MACE-3 (composite of non-fatal MI, non-fatal stroke, or CV death) vs. placebo by 12% on top of standard of care. CV benefit was consistent across subgroups of patients with and without established CVD²³.
 ‡ In real-world studies, ~40% more patients with T2DM were adherent to once-weekly Evenatide, once-weekly exenatide,
- liraglutide and lixisenatide

BID=twice daily, CKD=chronic kidney disease; CV=cardiovascular; CVD=cardiovascular disease; GLP-1 RA=glucagon-like peptide-1 receptor agonists; HbA1C=haemoglobin A1c; MACE=major adverse cardiovascular event; MI=myocardial infarction; T2DM=type

References: 1. Trulicity Hong Kong Prescribing Information. 2. Gerstein HC et al. Lancet. 2019;394:121-130. 3. Gerstein HC et al. Diabetes Obes Metab. 2018;20:42-49. 4. Trulicity 0.75 mg Instructions for Use. 5. Trulicity 1.5 mg Instructions for Use. 6. Mody R et al. Diabetes Obes Metab. 2021;23:106-115. 7. Divino V et al. Diabetes Ther. 2019;10:1067-1088.

Trulicity Abbreviated Prescribing Information.

Indication: Trulicity is indicated for the treatment of adults with insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise: 1. as monotherapy when metformin is considered inappropriate due to intolerance or contraindications 2. in addition to other medicinal products for the treatment of diabetes. **Dosage**: Adult Monotherapy: 0.75 mg once weekly. Add-on therapy: 1.5 mg once weekly. Elderly ≥75 years old: Initially 0.75 mg once weekly. Renal impairment: No dosage adjustment is required in patients with mild, moderate or severe renal impairment (eGFR <90 to ≥ 15 mL/min/1.73m2). **Administration**: To be injected subcutaneously in the abdomen, thigh or upper arm. It should not be administered intravenously or intramuscularly. The dose can be administered at any time of day, with or without meals. **Contraindications**: Hypersensitivity to dulaglutide or any of its excipients. **Special Precautions**: Do not use in patients with type 1 diabetes mellitus or for the treatment of diabetic ketoacidosis. Do not administer IV. Acute pancreatitis. Hypoglycaemia. Limited experience in patients with congestive heart failure. **Adverse Drug Reactions**: Abdominal distention, abdominal pain, acute pancreatitis, constipation, decreased appetite, dehydration, diarrhoea, dyspepsia, eructation, fatigue, first-degree atrioventricular block, flatulence, gastroesophageal reflux disease, hypoglycaemia, injection site reactions, nausea, sinus tachycardia, vomiting. EUSPC210CT2019. **Full prescribing information is available upon request.**

