D
dabetes is a multifactorial and multifaceted syndrome, which needs a multipronged approach to management.\textsuperscript{1} Judicious use of rational drug combinations assists in the timely achievement of glycemic targets in persons with type 2 diabetes.\textsuperscript{2} Fixed-dose combinations (FDCs) offer a person-friendly means of taking multiple drugs. Not only that, FDCs are physician-friendly but pharmacist-friendly as well, as they ease both prescription writing and dispensing.

In recent years, sodium-glucose transporter 2 inhibitors (SGLT2i) have created a paradigm shift in the management of type 2 diabetes.\textsuperscript{3} Apart from good glucose control, these drugs also ensure cardiovascular and renal benefits. This has made them a preferred choice in modern algorithms. Certain guidelines suggest the use of SGLT2i, with metformin, as first-line therapy.\textsuperscript{4} This move is welcome, as it allows persons living with type 2 diabetes to benefit from the pleiotropic advantages of SGLT2i.\textsuperscript{5}

While randomized controlled trials (RCTs) have always provided robust evidence for the efficacy, safety, and tolerability of drugs, their applicability to large populations can be questioned. Real-world evidence (RWE),\textsuperscript{6} therefore, is required to explore the utility of newly introduced medications. One way of doing this is to perform phase 4, or postmarketing trials. Phase 4 trials, conducted in India, allow medicines to be tested in Indian participants, with appropriate trial methodology, using clinically relevant endpoints under the robust controls associated with clinical trials. Thus, phase 4 trials offer the advantages of both phase 3 RCTs and RWE and study the safety as well as efficacy of the concerned drug.

Magdum et al. report the findings of such a prospective, multicentric, open-label, single-arm study, conducted on 276 Indian adults living with type 2 diabetes.\textsuperscript{7} These participants, aged 18–65, were inadequately controlled on therapy not only national but international relevance.

**References**