

Imeglimin in Type 2 Diabetes Mellitus: Expert Opinions and Consensus in Indian Context



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Dear Editor,

We read with interest the expert consensus by Seshadri et al. on imeglimin for the management of type 2 diabetes mellitus (T2DM). The article is timely and informative, particularly in view of the increasing complexity of diabetes management in India. The debate around the novel mechanism of imeglimin, which addresses both insulin resistance and mitochondrial dysfunction through mitochondrial routes, is well summarized and is in line with the increasing emphasis on preserving the function of the beta cell.¹

Recommendations on the use of imeglimin in patients intolerant to metformin or as an add-on therapy are practical and relevant. Its favorable safety profile, in view of low risk of hypoglycemia and gastrointestinal adverse reactions, makes it favorable in multiple comorbid conditions in India.^{1,2}

However, we would like to make a few comments:

- **Level of evidence classification:** Although the article categorizes recommendations at levels A, B, C, and E, it clearly omits level D, which typically includes nonanalytical studies (e.g., case reports or series of case reports). This could be useful, particularly given the anecdotal or observational nature of some of the allegations.
- **Lack of data on the Indian population:** Despite the focus on the Indian context, most of the cited studies, including TIMES 1–3 and others, were carried out in non-Indian populations, mainly in Japan.^{3,4} Although expert consensus offers guidance, real-world data from Indian patients, such as

the INDI-TIMES study, remain limited and are insufficiently reflected in the Consensus Recommendation List (CRL).⁵

- **Dosage clarity:** The article gives due emphasis to the fact that the preferred dose is 1000 mg twice daily. However, several of the reference studies, including the Fouqueray et al. study, show that 1500 mg BID has higher efficacy in reducing glycated hemoglobin (HbA1c) and fasting plasma glucose (FPG) compared to 1000 mg BID.⁶ The lack of detailed discussion on the potential confounders (e.g., tolerability, adverse effect profile, patient acceptability) associated with higher doses leaves an important gap in practical guidance.
- **Cost and availability considerations:** From a patient perspective, more comments on the cost-effectiveness of the medication would be valuable, particularly in rural India where affordability is often a key factor in adherence.

In conclusion, imeglimin is a promising agent with a novel mode of action and a safety profile that differentiates it from traditional oral agents. Specific data and more comprehensive long-term safety results in the Indian population are needed to support its widespread use in practice. The expert consensus provides a strong platform for advancing discussions and fostering further research on imeglimin in the Indian context.

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