- This retrospective cohort study compared the clinical effectiveness of liraglutide versus sitagliptin and assessed the associated economic outcomes at 6 months of follow-up among patients with type 2 diabetes mellitus (T2DM) treated in real-world practice in the United States.
- Adults patients (≥18 years old) with continuous use of liraglutide or sitagliptin for ≥3 months were included (*N* = 1,465) and assessed over 6 months.
- Liraglutide patients had a 0.31%-point greater reduction in A1C (0.95% vs. 0.63%-point; *P* <0.01) at 6 months of follow-up than sitagliptin patients, and were more likely to reach glycated hemoglobin (A1C) targets of ≤6.5% (odds ratio [OR]: 2.00; *P* <0.01) and <7% (OR: 1.55; *P* <0.01).
- Liraglutide patients had $994 lower mean diabetes-related medical costs per patient during follow-up ($1,241 vs. $2,235; *P* <0.01), but $544 higher diabetes-related pharmacy costs ($2,100 vs. $1,556; *P* <0.01), leading to no difference in the total diabetes-related costs between the two cohorts.
- In real-world clinical practice, liraglutide showed greater improvement in glycemic control and similar total diabetes-related costs compared to sitagliptin among adult patients with T2DM.

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