

Dose recommendations of currently available DPP-4 inhibitors according to degree of renal impairment^{1,6-8}

Degree of renal impairment*	Normal	Mild	Moderate	Severe
Trajenta ^{®1}	No dose adjustment	No dose adjustment	No dose adjustment	No dose adjustment
Sitagliptin ⁶	No dose adjustment	No dose adjustment	Dose should be reduced to 50 mg once daily in patients with moderate renal impairment Renal assessment is recommended prior to initiation of sitagliptin and periodically thereafter [†]	Dose should be reduced to 25 mg once daily in patients with severe renal impairment or with end-stage renal disease Renal assessment is recommended prior to initiation of sitagliptin and periodically thereafter [†]
Vildagliptin ⁷	No dose adjustment (50 mg once daily in combination with an SU)	No dose adjustment (50 mg once daily in combination with an SU)	Dose should be reduced to 50 mg once daily in patients with moderate renal impairment (50 mg once daily in combination with an SU)	Dose should be reduced to 50 mg once daily in patients with severe renal impairment (50 mg once daily in combination with an SU)
Saxagliptin ⁸	No dose adjustment	No dose adjustment	Dose should be reduced to 2.5 mg once daily in patients with moderate renal impairment Renal assessment is recommended prior to initiation of saxagliptin and periodically thereafter [†]	Dose should be reduced to 2.5 mg once daily in patients with severe renal impairment The experience in patients with severe renal impairment is very limited. Therefore, saxagliptin should be used with caution in this population. Saxagliptin is not recommended for patients with end-stage renal disease (ESRD) requiring haemodialysis Renal assessment is recommended prior to initiation of saxagliptin and periodically thereafter [†]

* Degree of renal impairment defined by respective summaries of product characteristics.

† Because there is a dosage adjustment based upon renal function, assessment of renal function is recommended prior to initiation and periodically thereafter.

Trajenta[®] is the first one dose, once daily DPP-4 inhibitor excreted primarily via the bile requiring no dose adjustment^{1,5-10}

