

## Diabetes Research

taking place at North Bristol NHS Trust

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R&I No	Project Title	Project Description
2969 End date: 31/12/2019	Address 2	Characterisation of people with new-onset type 1 diabetes (<6 months duration) and their siblings who are free from diabetes.
3839 End date: 31/01/2020	TriMaster v1	<p>The TriMaster trial is part of the larger MASTERMIND project which aims to help identify the most suitable treatment for patients with type 2 diabetes.</p> <p>It is known that patients with type 2 diabetes vary greatly in how well they respond to different diabetes drugs and whether they develop side effects to particular medications. In this study the research team aims to identify subgroups of patients that respond well or poorly to third-line therapies based on particular clinical characteristics such as their BMI and renal function.</p> <p>The current choice for non-injectable third-line therapy is between a DPP4 inhibitor, an SGLT2 inhibitor and a thiazolidinedione (TZD). However the decision of which treatment to choose lacks guidance on which patients will respond well or poorly to a particular therapy.</p> <p>This study is a randomised double-blind crossover trial in patients with type 2 diabetes who have poor glucose control on two classes of drugs. Patients who meet the current NICE guidelines for the addition of a third-line drug will be invited to take the 3 different available therapies for 4.5 months each in random order. As these drugs work in different ways the research team will be able to test whether the different clinical characteristics affect whether they respond well to the drugs, and/or make them more likely to experience side effects.</p>
3845 End date: 30/04/2021	StartRight	<p>To assess whether blood tests, either alone or in combination with clinical features, can help us tell if a patient needs rapid insulin treatment and should be initially treated as Type 1 or Type 2 diabetes.</p> <p>The treatment of Type 1 and Type 2 diabetes is very different. People with Type 1 diabetes rapidly stop making their own insulin, so need insulin injections from diagnosis. People with Type 2 diabetes can keep making their own insulin but it may not work as well as it should, so they can be treated with diet or tablets. While</p>

		<p>they may eventually need insulin treatment it is usually not until many years after diagnosis. It is often difficult for doctors to tell which kind of diabetes a person has, particularly in younger adults where both Type 1 and Type 2 diabetes are common. Because of this, sometimes (in about 15-20% of young adults) people are given the wrong diagnosis. This can have a huge impact as it means they could receive the wrong treatment. A person incorrectly diagnosed with Type 1 diabetes will be prescribed unnecessary insulin injections and miss out on other helpful therapies. A person incorrectly diagnosed with Type 2 diabetes may develop severely high glucose and become unwell with a condition called Diabetic Ketoacidosis if they do not receive insulin treatment.</p>
4035 End date: 17/02/2021	SOUL	Semaglutide cardiovascular outcomes trial in patients with type 2 diabetes
4112 End date: 27/01/2021	SOLOIST	<p>A Randomized, Double-blind, Placebo-controlled, Parallel-group, Multicentre Study to Evaluate the Effects of Sotagliflozin on Clinical Outcomes in Hemodynamically Stable Patients with Type 2 Diabetes post Worsening Heart Failure(WHF)</p> <p>The primary objective of this study is to demonstrate that sotagliflozin reduces cardiovascular (CV) mortality and morbidity (composite of CV death or Heart Failure [HF] requiring hospitalization) compared to placebo in hemodynamically stable patients with type 2 diabetes mellitus (T2D) after hospital admission for worsening heart failure (WHF).</p>
4335 End date: 23/09/2023	SELECT	Evaluation of cardiovascular outcomes with semaglutide in subjects with overweight or obesity and prior MI/stroke