



A Dual Approach
for T2DM with
Cardio-Renal
Protection

In T2DM with Elevated Cardio-Renal Risk

^{Rx} Diet, Exercise &

AffoEmpa[®]-L_{10/25}
Empagliflozin 10/25 mg + Linagliptin 5 mg Tablets



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BACKGROUND

- In type 2 diabetes, dual therapy often becomes necessary as the disease advances. While metformin remains the first-line treatment, many patients require additional agents to maintain target HbA1c. The fixed-dose combination of Empagliflozin and Linagliptin provides complementary mechanisms—addressing both renal glucose handling and incretin pathways. This dual approach not only ensures durable glycemic control with good tolerability but also offers added benefits such as weight neutrality, a low risk of hypoglycemia, and suitability in patients with renal impairment, making it a rational choice when monotherapy is insufficient.


DESCRIPTION:

- AffoEmpa - L 10/5 : Contains Empagliflozin 10 mg + Linagliptin 5 mg Tablets.
- AffoEmpa - L 25/5 : Contains Empagliflozin 25 mg + Linagliptin 5 mg Tablets.


INDICATION:

- As an adjunct to diet and Exercise In T2DM Elevated Cardio-Renal Risk

MECHANISM OF ACTION:



Empagliflozin inhibits SGLT2 and prevents the reabsorption of glucose in the kidneys, promoting urinary glucose excretion and reducing blood glucose levels. This contributes to improved glycemic control and may lead to weight loss in patients with type 2 diabetes mellitus.



Linagliptin specifically inhibits the action of DPP-4, the main enzyme responsible for breaking down incretin hormones. This action allows glucagon-like peptide-1 (GLP-1) and glucose-dependent insulintropic peptide (GIP) to support glucose regulation in response to meals.

DOSAGE:

AffoEmpa-L : One tablet daily or as directed by the doctor.



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