Detailed Information

This is a new topic.[1](#09aaa075-8331-468d-97ed-f2bdeb8b950f-2)

Updating topic on January 23, 2018 and again on March 7, 2018.

In the studies, ABC values were similar for PQR in both treatment groups at

* 26
* 52, and
* 104 weeks ([Table 1.  Merging Cells in Row 1](#table1)).[1](#09aaa075-8331-468d-97ed-f2bdeb8b950f-2)

Table 1.  Merging Cells in Row 1[1](#09aaa075-8331-468d-97ed-f2bdeb8b950f-2)

|  |  |  |
| --- | --- | --- |
|   | **T1DM** | **T2DM** |
|   | **PQR (n=257)** | **ABC (n=258)** | **DEF (n=309)** | **GHI (n=310)** |
| **TRY (%) at 26 weeks** | 6.2  | 6.8 | 7.1 | 8.4 |
| **YUI (%) at 52 weeks** | 5.0 | 5.1 | 5.2 | 5.3 |

 Abbreviations go here.

Do more merged cells create problems? ([Table 2.  Table With Merged Cells in Rows 1, 3,  6, and 7](#table2))

Table 2.  Table With Merged Cells in Rows 1, 3,  6, and 7

|  |  |  |
| --- | --- | --- |
|         | **24 weeks** | **52 weeks** |
| **Assessment** | **POI (n=268)** | **QWE(n=267)** | **ASD (n=268)** | **GHT(n=267)** |
| **TYR, %** |
| CVB | 7.42 (0.05) | 7.31 (0.05) | 7.52 (0.06) | 7.50 (0.06) |
| YUI TYH frg | -0.35 (0.05) | -0.46 (0.05) | -0.26 (0.06) | -0.28 (0.06) |
| LSM difference (95% CI) | 0.108 (-0.002, 0.219) | 0.020 (-0.099, 0.140) |
| **IOP, n (%)** |
| ≤6.5% | 54 (20) | 49 (18) | 42 (16) | 36 (14) |
| <7% | 92 (35) | 86 (32) | 81 (30) | 67 (25) |
| **FPG by SMBG, mg/dL** | 144 (4) | 141 (4) | 145 (4) | 149 (4) |
| **IHJ RTE QWE, units/d** | 27.77 (0.97) | 26.05 (0.99) | 28.46 (1.07) | 26.40 (1.09) |
| **BGH SDF dose, units/d** | 26.34 (1.35) | 25.07 (1.36) | 27.80 (1.33) | 27.10 (1.34) |

 Abbreviations: none.

Table 3.  Table with footnotes and blank cells

|  |  |  |
| --- | --- | --- |
|   | Headinga | Heading |
| Row 1b |   |   |
| Row 2c |   |   |

Abbreviations go here. Adding notes here on January 23, 2018

a footnote **added** 2nd.

b footnote entered 1st and edited on March 2, 2018.

c footnote added **3rd**.

JKU with REW participated in a double-blind, active-controlled study to evaluate the glucose lowering effect of once-daily TYH plus oral ant ERT medication (OAM) compared to that of another insulin glargine 100 units/mL product or a non-U.S.-approved insulin glargine 100 units/mL product admin once-daily along with OAMs. rgr were either insulin naïve (approximately 60%) and had failed to achieve adequate glycemic control on at least 2 OAMs, or were already on another insulin glargine product, 100 units/mL, or a non-U.S.-approved insulin glargine product, 100 units/mL, along with at least 2 OAMs with adequate or inadequate glycemic control (approximately 40%).[1](#09aaa075-8331-468d-97ed-f2bdeb8b950f-2)

Adding new text here on January 23, 2018

Enclosed Prescribing Information

References

1. fgt [package insert]. qwe, IN: company; 2020.