COMMENTS AND RESPONSES

Response to Comment on: Ramos-Zavala et al. Effect of Diacerein on Insulin Secretion and Metabolic Control in Drug-Naïve Patients With Type 2 Diabetes: A Randomized Clinical Trial. Diabetes Care 2011;34:1591–1594

We thank Tobar et al. (1) for sharing the brief results and conclusions of an elegant study in an animal model of obesity and type 2 diabetes that allowed confirmation of the antihyperglycemic effect of diacerein, a medication frequently used in the treatment of rheumatic diseases, and the responsible mechanisms by which diacerein was able to reduce the chronic subclinical inflammation at the cellular level in liver, muscle, and adipose tissue with improvement of glucose metabolism, inducing a reduction in hepatic glucose output. Contrary to those findings, in our study in drug-naïve patients with type 2 diabetes (2), insulin sensitivity was not improved, interleukin-6 levels were not significantly decreased, and diminution of triglycerides concentration was limited with diacerein administration. This may be due to differences in the inflammatory behavior between the studied models (animal and human) or to insufficient treatment duration, or may be, as was commented by Tobar et al., because hepatic glucose output was not measured, and this is an important evaluation. In any case, the abovementioned limitations allow justification of other investigations under different conditions, independent of the beneficial effect on insulin secretion reported in our article that may support the potential use of diacerein in the treatment of patients with type 2 diabetes.

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