Incorrect description of mode of excretion of linagliptin

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Dear Dr Zhou,

Boehringer Ingelheim, owner of the investigational drug linagliptin, would like to point out that in the recent review paper by Cox and colleagues,¹ titled “Dipeptidyl peptidase-4 inhibitors in the management of type 2 diabetes: safety, tolerability, and efficacy”, which was published in *Drug, Healthcare and Patient Safety*, the authors have incorrectly described the mode of excretion for linagliptin as being predominantly renal. The correct statement should have read: “Excretion of linagliptin is predominantly nonrenal”, as described in the referenced pharmacokinetic study performed by Heise and colleagues.² A nonrenal elimination route may be important in patients with renal impairment, which is common in patients with type 2 diabetes, so this distinction may be of clinical relevance. We would be grateful if you could clarify this for your readership to help avoid any confusion.

References

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2. Heise T, Graefe-Mody EU, Hüttner S, Ring A, Trommeshauser D, Dugi KA. Pharmacokinetics, pharmacodynamics and tolerability of multiple oral doses of linagliptin, a dipeptidyl peptidase-4 inhibitor in male type 2 diabetes patients. *Diabetes Obes Metab*. 2009;11(8):786–794.

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