

WHAT IS CLAIMED IS:

1. A method of improving glycemic control in a human patient in need thereof, the method comprising administering to the patient a sufficient amount of:
 - (i) cotadutide (SEQ ID NO:4);
 - (ii) dapagliflozin; and
 - (iii) metforminto improve glycemic control.
2. A method of reducing body weight in a human patient in need thereof, the method comprising administering to the patient a sufficient amount of:
 - (i) cotadutide (SEQ ID NO:4);
 - (ii) dapagliflozin; and
 - (iii) metforminto reduce body weight.
3. A method of treating type 2 diabetes mellitus (T2DM) in a human patient in need thereof, the method comprising administering to the patient a sufficient amount of:
 - (i) cotadutide (SEQ ID NO:4);
 - (ii) dapagliflozin; and
 - (iii) metforminto treat T2DM.
4. The method of any one of claims 1-3, wherein the cotadutide is administered at an initial dose of at least 20 μg daily and administered at a second higher dose thereafter.
5. The method of claim 4, wherein the cotadutide is administered at a third dose after the administration of the second dose, wherein the third dose is higher than the second dose, optionally wherein the third dose does not exceed 600 μg daily or wherein the third dose does not exceed 300 μg daily.

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6. The method of claim 4 or 5, wherein the initial dose is administered for about 7 days to about 14 days.
7. The method of any one of claims 1-6, wherein the cotadutide is administered at an initial dose of 100 μ g daily for 7 days, at second dose of 200 μ g daily for the next 7 days, and subsequently at a dose of 300 μ g daily.
8. The method of any one of claims 1-7, wherein the cotadutide is administered by injection, optionally wherein the administration is subcutaneous.
9. The method of any one of claims 1-8, wherein the dapagliflozin is administered at a dose of 5 mg or 10 mg daily, optionally at a dose of 10 mg daily.
10. The method of any one of claims 1-9, wherein the dapagliflozin is administered orally.
11. The method of any one of claims 1-10, wherein the metformin is administered at a dose of 500 mg to 2550 mg daily, 500 mg to 2000 mg daily, 500 mg to 1000 mg daily, or 500 mg to 850 mg daily.
12. The method of any one of claims 1-11, wherein the metformin is administered orally.
13. The method of any one of claims 1-12, wherein the administration reduces the mixed-meal tolerance test (MMTT) plasma glucose area under the curve (AUC)_{0-4hours} in the patient.
14. The method of claim 13, wherein the administration reduces the MMTT plasma glucose AUC_{0-4hours} in the patient by at least 25 mg-hr/dL, at least 50 mg-hr/dL, at least 75 mg-hr/dL, at least 100 mg-hr/dL, or at least 150 mg-hr/dL.

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15. The method of claim 13 or 14, wherein the administration reduces the percent MMTT plasma glucose $AUC_{0-4\text{hours}}$ in the patient by at least 5%, at least 10%, at least 15%, or at least 20%.
16. The method of any one of claims 1-15, wherein the administration reduces continuous glucose monitoring (CGM) glucose AUC_{0-24} in the patient.
17. The method of claim 16, wherein the administration reduces CGM glucose AUC_{0-24} in the patient by at least 200 mg-hr/dL, at least 250 mg-hr/dL, at least 300 mg-hr/dL, at least 350 mg-hr/dL, at least 400 mg-hr/dL, at least 450 mg-hr/dL, at least 500 mg-hr/dL, at least 550 mg-hr/dL, at least 600 mg-hr/dL, or at least 650 mg-hr/dL.
18. The method of any one of claims 1-17, wherein the administration reduces 24-hour CGM mean glucose in the patient.
19. The method of claim 18, wherein the administration reduces 24-hour CGM mean glucose in the patient by at least 10 mg/dL, at least 15 mg/dL, at least 20 mg/dL, or at least 25 mg/dL.
20. The method of any one of claims 1-19, wherein the administration reduces the standard deviation (SD) in CGM glucose in the patient by at least 5 mg/dL.
21. The method of any one of claims 1-20, wherein the administration reduces the CGM mean amplitude of glucose excursion (MAGE) in the patient by at least 10 mg/dL, at least 15 mg/dL, at least 20 mg/dL, or at least 25 mg/dL.
22. The method of any one of claims 1-21, wherein the administration reduces fasting plasma glucose (FPG) in the patient.
23. The method of claim 22, wherein the administration reduces FPG in the patient by at least 5 mg/dL, at least 10 mg/dL, at least 15 mg/dL, at least 20 mg/dL, at least 25 mg/dL, or at least 30 mg/dL.

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24. The method of any one of claims 1-23, wherein the administration reduces Hemoglobin A1c (HbA1c) in the patient by at least 0.5% or by at least 1%.
25. The method of any one of claims 1-24, wherein the administration reduces body weight of the patient by at least 2 kg or by at least 3 kg.
26. The method of any one of claims 13-25, wherein the reduction occurs with 28 days from the initial administration of the cotadutide.
27. The method of any one of claims 1-26, wherein the administration produces euglycemic glucose levels in the patient.
28. The method of any one of claims 1-27, wherein the administration prevents hyperglycemic glucose levels in the patient.
29. The method of any one of claims 2-28, wherein the administration improves glycemic control in the patient.
30. The method of any one of claims 1 and 3-28, wherein the administration reduces body weight in the patient.
31. The method of any one of claims 1, 2, and 4-28, wherein the administration treats T2DM in the patient.
32. The method of any one of claims 1-31, wherein the administration is for at least four weeks.
33. The method of any one of claims 1-32, wherein the administration is an adjunct to diet and exercise.
34. The method of any one of claims 1-33, wherein the patient has a body mass index (BMI) of $\geq 25 \text{ kg/m}^2$ to $\leq 40 \text{ kg/m}^2$.

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35. The method of any one of claims 1-34, wherein the patient has a hemoglobin A1c (HbA1c) of $\geq 7.0\%$ to $\leq 10.0\%$.

36. The method of any one of claims 1, 2, 4-30, and 32-35, wherein the patient has T2DM.