CLAIMS

1. Use of a pharmaceutical combination for the manufacture of a medicament in the treatment of a diabetes type 2 patient, wherein the diabetes type 2 is insufficiently controlled by at least one oral antidiabetic drug, said combination comprising

(a) desPro^{36}Exendin-4(1-39)-Lys6-NH2 or/and a pharmaceutically acceptable salt thereof,

(b) insulin glargine or/and pharmaceutically acceptable salt thereof, and

(c) metformin or/and a pharmaceutically acceptable salt thereof,

wherein the treatment of the diabetes type 2 patient comprises the steps:

(i) parenteral administration of compound (b) and oral administration of compound (c) for at least 4 weeks, and

(ii) continuing treatment by parenteral administration of compounds (a) and (b) and oral administration of compound (c),

wherein at the onset of step (i) the patient has a 2 hours postprandial plasma glucose concentration of at least 12 mmol/L, and

wherein the amount of compound (b) to be administered in steps (i) or/and (ii) is adjusted so that a predetermined fasting plasma glucose level or/and a predetermined self-monitored plasma glucose level is reached or at least approximated.

2. The use of claim 1, wherein step (i) comprises parenteral administration of compound (b) and oral administration of compound (c) for at least 4 weeks, at least 8 weeks, at least 12 weeks, or at least 16 weeks.

3. The use of claim 2, wherein step (i) comprises parenteral administration of compound (b) and oral administration of compound (c) for at least about 12 weeks.

4. The use of claims 1 or 3, wherein step (i) is performed with the proviso that compound is not administered parenterally.

5. The use of any one of the preceding claims, wherein steps (i) or/and (ii) further comprise the oral administration of a thiazolidinedione.

6. The use of any one of the preceding claims, wherein parenteral and oral administration in steps (i) or/and (ii) is performed on a daily basis.

7. The use of any one of the preceding claims, wherein the amount of compound (b) to be administered in steps (i) or/and (ii) is adjusted on the basis of daily measurements of plasma glucose concentration.

8. The use of any one of the preceding claims, wherein the amount of compound (b) to be administered in steps (i) or/and (ii) is adjusted so that a fasting plasma glucose level of about 4.4 mmol/l to about 5.6 mmol/l or/and a self monitored plasma glucose level of about 8 mmol/l is reached or at least approximated.

9. The use of any one of the preceding claims, wherein the treatment of a diabetes type 2 patient improves glycemic control in a diabetes type 2 patient.

10. The use of claim 9, wherein glycemic control is postprandial glycemic control.

11. The use of claim 10, wherein postprandial glycemic control is control of postprandial plasma glucose or/and postprandial glucose excursion.

12. The use of any one of the preceding claims, wherein the treatment of a diabetes type 2 patient improves self-monitored plasma glucose.

13. The use of any one of the preceding claims, wherein the treatment of a diabetes type 2 patient induces weight loss or/and prevents weight gain.

14. The use of any one of the preceding claims, wherein the treatment of a diabetes type 2 patient prevents hypoglycemia.

15. The use according to any one of the preceding claims, wherein the patient to be treated is obese.

16. The use according to any one of the preceding claims, wherein the patient to be treated has a body mass index of at least 30 kg/m^2.

17. The use according to any one of the preceding claims, wherein the patient to be treated is an adult patient.

18. The use according to any one of the preceding claims, wherein the patient to be treated does not receive a treatment by an insulin or/and a pharmaceutically acceptable salt thereof at the onset of step (i).

19. The use of any one of the preceding claims, wherein in the patient to be treated, diabetes mellitus type 2 has been diagnosed at least 1 year or at least 2 years before onset of therapy.

20. The use of any one of the preceding claims, wherein the patient to be treated has a $_{HbA1c}$ value of about 7 to about 10%.

21. The use of any one of the preceding claims, wherein at the onset of step (i), the patient has a fasting plasma glucose concentration of at least 8 mmol/L.

22. The use of any one of the preceding claims, wherein at the onset of step (i), the patient has a 2 hours postprandial plasma glucose concentration of at least 12 mmol/L, or at least 14 mmol/L.

23. The use of any one of the preceding claims, wherein at the onset of step (i), the patient has a glucose excursion of at least 2 mmol/L, at least 3 mmol/L, at least 4 mmol/L or at least 5 mmol/L, wherein the glucose excursion is the difference of the 2 hours postprandial plasma glucose concentration and plasma glucose concentration 30 minutes prior to a meal test.

24. The use according to any one of the preceding claims, wherein the desPro^{36}Exendin-4(1-39)-Lys6-NH2 or/and the pharmaceutically acceptable salt thereof is prepared for parenteral administration in a daily dose selected from the range of 10 µg to 20 µg.

CLAIMS

1. Use of a pharmaceutical combination for the manufacture of a medicament in the treatment of a diabetes type 2 patient, wherein the diabetes type 2 is insufficiently controlled by at least one oral antidiabetic drug, said combination comprising

(a) desPro^{36}Exendin-4(1-39)-Lys6-NH2 or/and a pharmaceutically acceptable salt thereof,

(b) insulin glargine or/and pharmaceutically acceptable salt thereof, and

(c) metformin or/and a pharmaceutically acceptable salt thereof,

wherein the treatment of the diabetes type 2 patient comprises the steps:

(i) parenteral administration of compound (b) and oral administration of compound (c) for at least 4 weeks, and

(ii) continuing treatment by parenteral administration of compounds (a) and (b) and oral administration of compound (c),

wherein at the onset of step (i) the patient has a 2 hours postprandial plasma glucose concentration of at least 12 mmol/L, and a glucose excursion of at least 5 mmol/L, wherein the glucose excursion is the difference of the 2 hours postprandial plasma glucose concentration and plasma glucose concentration thirty (30) minutes prior to a meal test; and

wherein the amount of compound (b) to be administered in steps (i) or/and (ii) is adjusted so that a predetermined fasting plasma glucose level or/and a predetermined self-monitored plasma glucose level is reached .

2. The use of claim 1, wherein step (i) comprises parenteral administration of compound (b) and oral administration of compound (c) for at least 4 weeks, at least 8 weeks, at least 12 weeks, or at least 16 weeks.

3. The use of claim 2, wherein step (i) comprises parenteral administration of compound (b) and oral administration of compound (c) for at least about 12 weeks.

4. The use of claims 1 or 3, wherein step (i) is performed with the proviso that compound (a) is not administered parenterally.

5. The use of any one of the preceding claims, wherein steps (i) or/and (ii) further comprise the oral administration of a thiazolidinedione.

6. The use of any one of the preceding claims, wherein parenteral and oral administration in steps (i) or/and (ii) is performed on a daily basis.

7. The use of any one of the preceding claims, wherein the amount of compound (b) to be administered in steps (i) or/and (ii) is adjusted on the basis of daily measurements of plasma glucose concentration.

8. The use of any one of the preceding claims, wherein the amount of compound (b) to be administered in steps (i) or/and (ii) is adjusted so that a fasting plasma glucose level of about 4.4 mmol/l to 5.6 mmol/l or/and a self-monitored plasma glucose level of 8 mmol/l is reached.

9. The use of any one of the preceding claims, wherein the treatment of a diabetes type 2 patient improves glycemic control in a diabetes type 2 patient.

10. The use of claim 9, wherein glycemic control is postprandial glycemic control.

11. The use of claim 10, wherein postprandial glycemic control is control of postprandial plasma glucose or/and postprandial glucose excursion.

12. The use of any one of the preceding claims, wherein the treatment of a diabetes type 2 patient improves self-monitored plasma glucose.

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15. The use according to any one of the preceding claims, wherein the diabetes type 2 patient to be treated is obese.

16. The use according to any one of the preceding claims, wherein the patient to be treated has a body mass index of at least 30 kg/m^2.

17. The use according to any one of the preceding claims, wherein the patient to be treated is an adult patient.

18. The use according to any one of the preceding claims, wherein the patient to be treated does not receive a treatment by an insulin or/and a pharmaceutically acceptable salt thereof at the onset of step (i).

19. The use of any one of the preceding claims, wherein in the patient to be treated, diabetes mellitus type 2 has been diagnosed at least 1 year or at least 2 years before onset of therapy.

20. The use of any one of the preceding claims, wherein the patient to be treated has a $_{HbA1c}$ value of 7 to 10%.

21. The use of any one of the preceding claims, wherein at the onset of step (i), the patient has a fasting plasma glucose concentration of at least 8 mmol/L.

22. The use of any one of the preceding claims, wherein at the onset of step (i), the patient has a 2 hours postprandial plasma glucose concentration of at least 12 mmol/L, or at least 14 mmol/L.

23. The use according to any one of the preceding claims, wherein the desPro^{36}Exendin-4(1-39)-Lys6-NH2 or/and the pharmaceutically acceptable salt thereof is prepared for parenteral administration in a daily dose selected from the range of 10 µg to 20 µg.