NOVO NORDISK A S
Form 6-K
June 09, 2008

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 6-K

REPORT OF FOREIGN ISSUER

Pursuant to Rule 13a-16 or 15d-16
of the Securities Exchange Act of 1934

June 9, 2008

NOVO NORDISK A/S
(Exact name of Registrant as specified in its charter)

NOVO ALLE
DK-2880, BAGSVAERD
DENMARK
(Address of principal executive offices)

Indicate by check mark whether the registrant files or will file annual reports under cover of Form 20-F or Form 40-F

Form 20-F [X] Form 40-F [ ]

Indicate by check mark whether the registrant by furnishing the information contained in this Form is also thereby furnishing the information to the Commission pursuant to Rule 12g3-2(b) under the Securities Exchange Act of 1934.

Yes [ ] No [X]

If "Yes" is marked, indicate below the file number assigned to the registrant in connection with Rule 12g-32(b):82-_____

RESEARCH UPDATE

CLINICAL STUDY SHOWS LIRAGLUTIDE PROVIDES STATISTICALLY SIGNIFICANTLY BETTER BLOOD GLUCOSE CONTROL THAN EXENATIDE

Novo Nordisk today announced headline clinical results from a phase 3 clinical study (LEAD(TM) 6) comparing the effects of liraglutide, a once-daily human GLP-1 analogue, with exenatide, a twice-daily GLP-1 analogue. The 26-week study,

which is the first study to provide a direct comparison between the two GLP-1 analogues, included 464 people with type 2 diabetes who were randomised to treatment with either liraglutide once daily or exenatide twice daily, as add-on to their existing treatment consisting of metformin, sulfonylurea, or a combination of both.

The average HbA1c level at the beginning of the study was slightly above 8% and the primary endpoint was the change in HbA1c. Patients treated with liraglutide achieved a reduction in HbA1c of more than 1.1 percentage points, compared to a reduction in HbA1c of less than 0.8 percentage points in the exenatide group, a difference which was statistically significant. Liraglutide treatment led to statistically significantly more patients achieving both the American Diabetes Association (ADA) and American Association of Clinical Endocrinologists (AACE) HbA1c targets of