EMPA-HEART CardioLink-6 Trial

Discussant
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T2DM

SGLT2i

Improved glycemia
Weight loss

Delayed decline in eGFR
Delayed albuminuria

Zelniker + Braunwald JACC 72: 1845, 2018
Zelniker Lancet 2018

HF hosp
### Primary Outcome

**Empagliflozin Reduces LVMI\(^a\)**

<table>
<thead>
<tr>
<th>Baseline LVMI(^a) (g/m(^2))</th>
<th>62.2</th>
<th>59.5</th>
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<tbody>
<tr>
<td>Mean change in LVMI(^a) (g/m(^2)) from baseline</td>
<td>Placebo</td>
<td>-0.01</td>
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</tbody>
</table>

**LVM regression (g)**

| -0.39 (10.83) | -4.71 (15.43) |

Data are presented as mean (SD) for the intention-to-treat population.

\(^a\) LV mass with papillary muscle mass indexed to body surface area.
Exploratory Analyses
Relationship between LVM*, BP and Hematocrit

“Afterload”

Mean Systolic BP (mmHg)
PCC 0.34

“Preload”

Hematocrit
PCC -0.20

*at 6-months in both groups
T2DM

Improved glycemia
Weight loss

SGLT2i

Improved myocardial bioenergetics
Effect on NHE

- Delayed decline in eGFR
- Delayed albuminuria

Preload ✔
Afterload ✔

Epicardial adipose tissue

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