## SCORED:

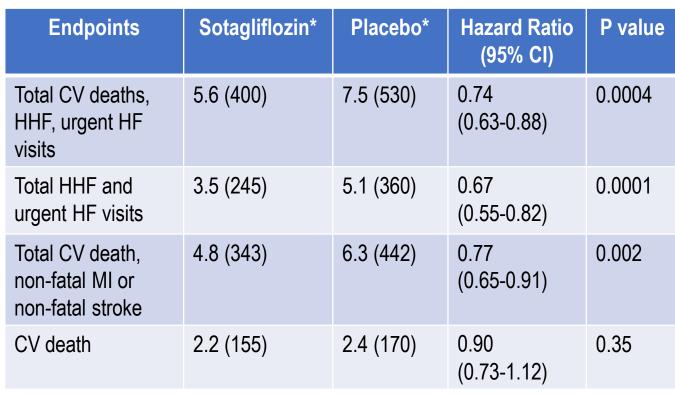
## Effect of Sotagliflozin on Cardiovascular and Renal Events in Patients With Type 2 Diabetes and Moderate Renal Impairment Who Are at Cardiovascular Risk

**Purpose**: Compare the effect of sotagliflozin to placebo on total occurrences of cardiovascular (CV) death, hospitalizations for heart failure (HHF), and urgent visits for HF in patients with type 2 diabetes (A1c  $\geq$ 7%), cardiovascular risk factors, and chronic kidney disease.

**Trial Design**: N = 10,584, multicenter, randomized, doubleblind, placebo-controlled, parallel group; sotagliflozin daily vs placebo; median 16 month follow up.

**Primary Endpoints:** Composite of CV death, hospitalizations for HF, urgent visits for HF.

**Secondary**: HHF + urgent HF visits, CV death + non-fatal MI/stroke, CV death, CV death + HHF + urgent HF visits, HF events while hospitalized, composite renal event.



\*Events/100 patient-years (number of events)

**Results**: In patients with diabetes and chronic kidney disease, sotagliflozin significantly reduced the composite of total CV deaths, hospitalizations for HF, and urgent HF visits by 26%. Total HHF and urgent HF visits were reduced by 33%. There was no significance difference in all-cause mortality.

