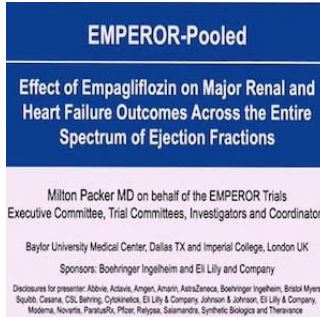


#ESCCongress: Results of the EMPEROR-Preserved Trial



EMPEROR-Pooled

Effect of Empagliflozin on Major Renal and Heart Failure Outcomes Across the Entire Spectrum of Ejection Fractions

Milton Packer MD on behalf of the EMPEROR Trials Executive Committee, Trial Committees, Investigators and Coordinators

Baylor University Medical Center, Dallas TX and Imperial College, London UK

Sponsors: Boehringer Ingelheim and Eli Lilly and Company

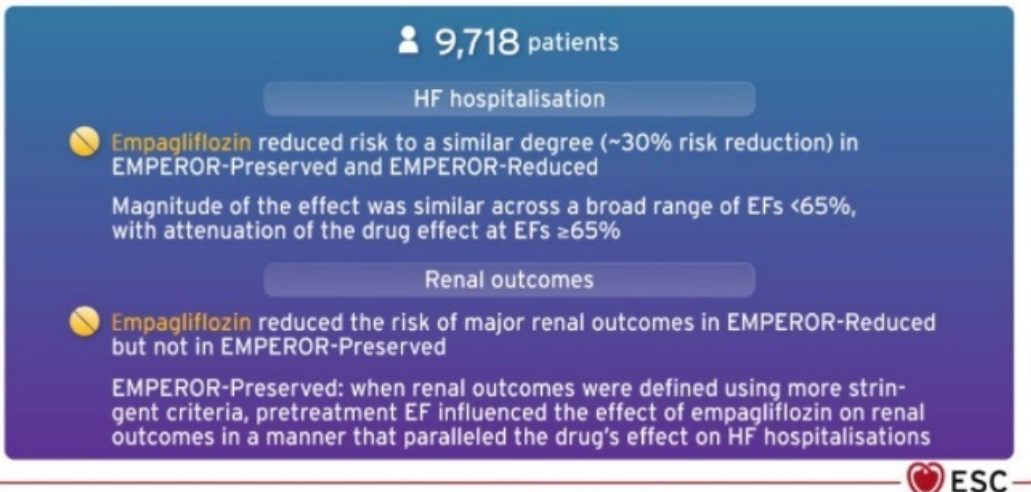
Disclosures for presenter: Abbvie, Actavis, Amgen, AstraZeneca, Boehringer Ingelheim, Bristol Myers Squibb, Celastrol, CSL Behring, Cyclacel, Eli Lilly & Company, Johnson & Johnson, Eli Lilly & Company, Moderna, Novartis, ParausRx, Pfizer, Relays, Salamandra, Synthetic Biologics and Theravance

In a Hot Line Session at the ESC Congress 2021, the results of the EMPEROR-Preserved trial were presented that demonstrated a significant reduction in composite cardiovascular endpoints in patients with heart failure and preserved ejection fraction.

This was a pooled analysis of two randomised trials that investigated the beneficial effects of empagliflozin. Both trials evaluated the effects of empagliflozin versus placebo in patients with established heart failure and receiving appropriate treatments. Study participants received empagliflozin or placebo for an average of 24 months. However, a major difference between EMPEROR-Reduced and EMPEROR-Preserved was that in the REDUCED trial, enrolled patients had heart failure and ejection fraction of 40% or less, while in the PRESERVED trial, the patients had heart failure and ejection fraction of more than 40%.

The EMPEROR-Reduced trial had previously shown that empagliflozin reduced the risk of cardiovascular death or hospitalisation in heart failure patients with reduced ejection fraction. Now, the EMPEROR-Preserved trial also shows benefits of empagliflozin treatment in these patients. Nine thousand seven hundred eighteen patients were included in the analysis. Findings show a reduction in the risk of heart failure hospitalisation by 30%, which is similar in both Preserved and Reduced. Empagliflozin reduced the risk of major renal outcomes in EMPEROR-Reduced, but this was not observed in EMPEROR-Preserved.

Results



9,718 patients

HF hospitalisation


- Empagliflozin reduced risk to a similar degree (~30% risk reduction) in EMPEROR-Preserved and EMPEROR-Reduced

Magnitude of the effect was similar across a broad range of EFs <65%, with attenuation of the drug effect at EFs ≥65%

Renal outcomes

- Empagliflozin reduced the risk of major renal outcomes in EMPEROR-Reduced but not in EMPEROR-Preserved

EMPEROR-Preserved: when renal outcomes were defined using more stringent criteria, pretreatment EF influenced the effect of empagliflozin on renal outcomes in a manner that paralleled the drug's effect on HF hospitalisations



Overall, considering the pooled analysis of both studies, these findings clearly show the benefits of empagliflozin in patients with heart failure and with a reduced and preserved ejection fraction.

Source: [ESC Congress 2021](#)

Image Credit: [ESC Congress 2021](#)

