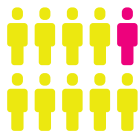


Phase III EMPA-KIDNEY Trial Full Data

Study of chronic kidney disease progression or cardiovascular (CV) death with empagliflozin



BURDEN OF CHRONIC KIDNEY DISEASE (CKD)



CKD is a leading cause of death worldwide, affecting more than 850 million people globally^{1,2}



CKD **doubles** a person's risk for hospitalization³



CKD is closely linked with several **metabolic and cardiovascular (CV) diseases**⁴



Prevention of kidney disease progression and reduction of CV risk **remain significant unmet clinical needs**^{5,6}

ABOUT THE EMPA-KIDNEY TRIAL

Study design



EMPA-KIDNEY is the **largest and broadest** SGLT2 inhibitor trial in CKD to date⁷



The trial evaluated the efficacy and safety of Jardiance® (empagliflozin) across a broad spectrum of more than **6,600 adults with CKD**⁷



The trial included adults with CKD who have been **under-represented** in previous SGLT2i trials⁸

RESULTS

EMPA-KIDNEY demonstrated that **empagliflozin reduced the relative risk of:**

Kidney disease progression* or CV death by^{9,10}

28%

Hospitalization by any cause by**^{9,10}

14%

Outcomes have the potential to bring relief for people with CKD and reduce the burden on healthcare systems¹¹

CONCLUSION

EMPA-KIDNEY follows the EMPA-REG OUTCOME® and EMPEROR trials which showed cardiovascular and kidney benefits with empagliflozin^{12,13,14}

*Defined as end-stage kidney disease (the initiation of maintenance dialysis or receipt of a kidney transplant), a sustained decline in eGFR to below 10 mL/min/1.73m², renal death or a sustained decline of at least 40% in eGFR from randomization) **A pre-specified confirmatory endpoint

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