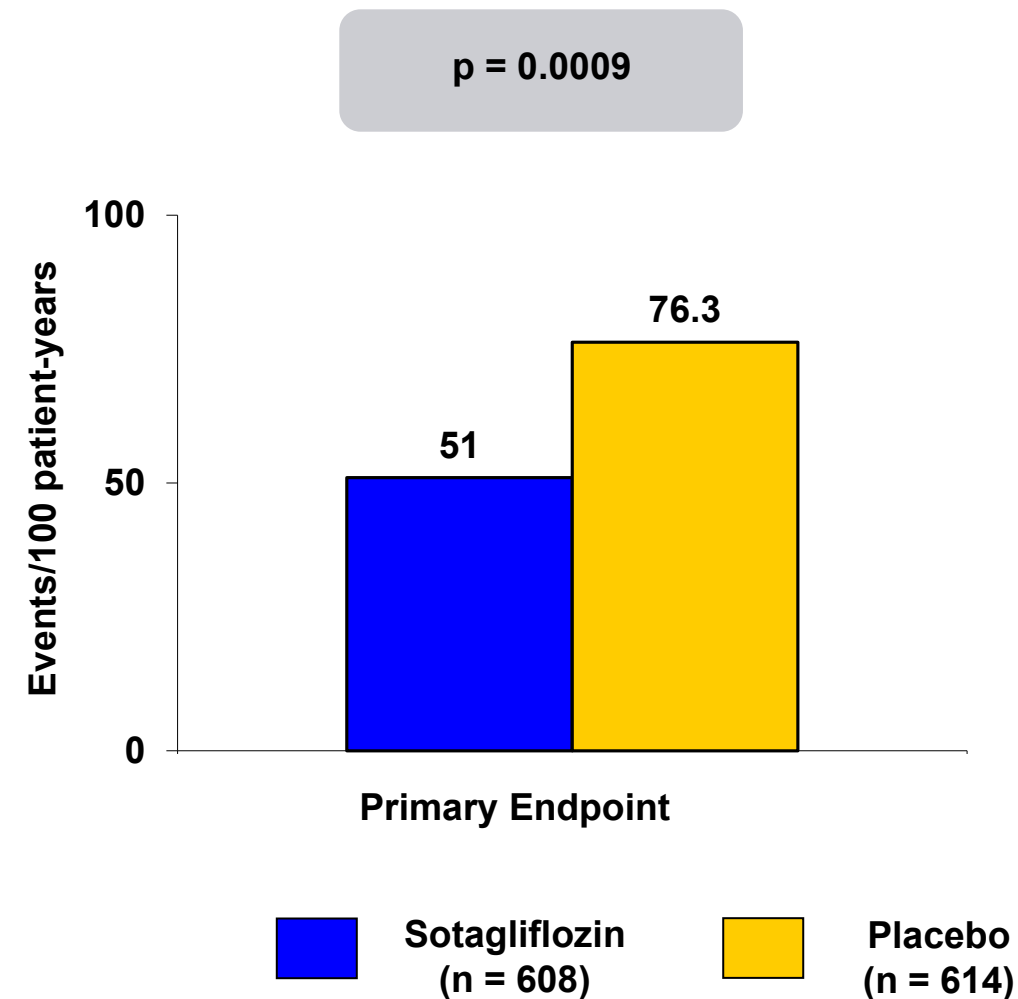


SOLOIST-WHF

#AHA20



Trial Description: Patients with T2DM who were recently hospitalized for worsening HF were randomized in a 1:1 fashion to receive either sotagliflozin 400 mg daily or placebo. Patients were followed for 18 months.



RESULTS

- Trial terminated early. Primary endpoint (CV death, HFrHF, urgent HF visit) for sotagliflozin vs. placebo: 51.0 vs. 76.3 events/100 patient-years (HR 0.67, 95% CI 0.52-0.85, $p = 0.0009$)
- Total CV death and HFrHF: 60 vs. 86 events/100 patient-years ($p = 0.003$); first CV death and HFrHF: 33% vs. 48% ($p = 0.003$); CV death: 10.6 vs. 12.5 events/100 patient-years ($p = 0.36$)
- Change in KCCQ-12 score: 17.7 vs. 13.6 ($p = 0.005$)

CONCLUSIONS

- Sotagliflozin initiated before or shortly after discharge resulted in a significantly lower total number of HF hospitalizations/urgent visits and CV deaths than placebo among patients with T2DM and HF

Bhatt DL, et al. N Engl J Med 2020;Nov 16:[Epub].