

# EMPA-KIDNEY

Empagliflozin in Patients With Chronic Kidney Disease

**International, Randomized, Parallel-Group,  
Double-Blind, Placebo-Controlled Trial**

**OBJECTIVE:** To evaluate the effect of empagliflozin treatment on the progression of kidney disease and CV disease and to examine the safety profile among participants with chronic kidney disease.

**6,609**  
PATIENTS

**INCLUSION CRITERIA:**

- Race-adjusted eGFR of at least 20 but less than 45mL/minute/1.73m<sup>2</sup>
- Urinary albumin-to-creatinine ratio of at least 200 at screening visit
- Clinically appropriate dose of single agent RAS inhibitor with or without diabetes



**EMPAGLIFLOZIN**  
(N=3,304)

vs.



**PLACEBO**  
(N=3,305)

## PRIMARY ENDPOINT

The primary outcome, progression of kidney disease or death from CV cause, occurred in 13.1% in the empagliflozin group and 16.9% in the placebo group,  $p < 0.001$

## SECONDARY ENDPOINT

For Empagliflozin vs. Placebo:

Hospitalization for heart failure or death from CV cause: 4.0% vs. 4.6%,  $p = 0.15$

Hospitalization for any cause:

24.8 events/100 patient-years vs. 29.2 events/100 person-years,  $p = 0.003$

Death from any cause: 4.5% vs. 5.1%,  $p = 0.21$

Progression of kidney disease: 11.6% vs. 15.2%, HR 0.71; 95% CI 0.62–0.81

## CONCLUSION

Among patients with chronic kidney disease with or without diabetes, empagliflozin led to a lower risk of progression of kidney disease or death from CV cause than placebo.