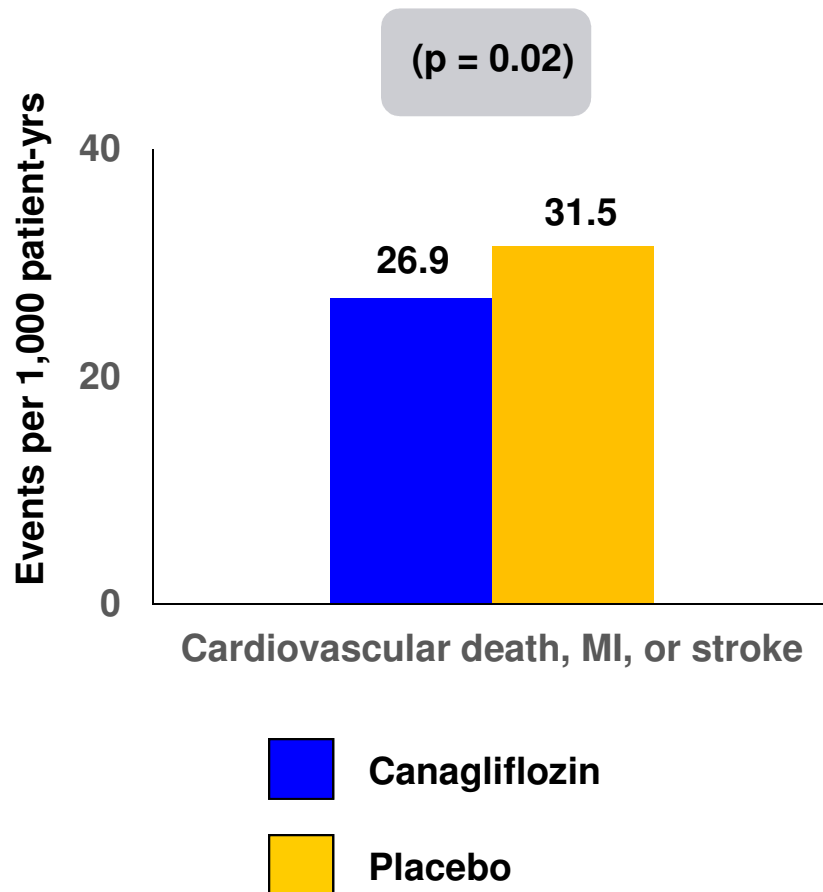


# CANVAS

**Trial design:** Patients with type 2 diabetes were randomized to canagliflozin (n = 5,795) vs. placebo (n = 4,347). Patients in the canagliflozin arm received 300 mg daily or 100 mg daily.



## Results

- Cardiovascular death, MI, or stroke: 26.9 participants per 1,000 patient-years of the canagliflozin group vs. 31.5 participants per 1,000 patient-years of the placebo group (p = 0.02 for superiority, p < 0.001 for noninferiority)
- Amputation: 6.3 participants per 1,000 patient-years vs. 3.4 participants per 1,000 patient-years (p < 0.05)

## Conclusions

- Among patients with type 2 diabetes, canagliflozin was beneficial. Canagliflozin compared with placebo was associated with a lower frequency of adverse cardiovascular events. Amputation occurred more frequently with canagliflozin.