BASELINE CHARACTERISTICS OF PATIENTS ENROLLED IN THE EMPACT-MI TRIAL

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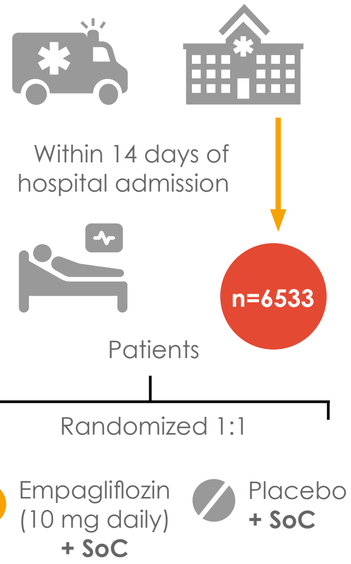
Study design

EMPACT

Double-blind, randomized, placebo-controlled, event-driven trial to evaluate the efficacy and safety of **empagliflozin compared with placebo**, in addition to standard of care, in patients with **acute MI and high risk of new-onset HF or mortality**



Key eligibility criteria
- Hospital admission for spontaneous AMI
- Signs and symptoms of congestion requiring treatment or newly developed LVEF <45% AND
- One additional HF risk factor (enrichment criterion)*
- No history of HF

Primary endpoint:
- Composite endpoint of time to first event of HHF or ACM

Secondary endpoints:
Total number of:
- HHF or ACM
- Non-elective CV hospitalizations or ACM
- Non-elective all-cause hospitalizations or ACM
- Hospitalizations for MI or ACM

Patients enrolled in EMPACT-MI

6522 participants randomized 1:1 (empagliflozin 10 mg or placebo once-daily) at 451 sites across 22 countries

Mean age: 64 yrs	**Male: 75%**	**White race: 84%**	**prior AMI: 13%**	**Median time from AMI to randomization: 5 days**
T2D: 32%	**STEMI: 74%**	**PCI: 88.8%**	**CABG: 0.5%**	

57% with acute signs or symptoms of congestion requiring treatment

78% with newly depressed LVEF <45%

36% met both criteria

78% participants had 1–3 enrichment criteria*

Most common enrichment criteria

50% aged ≥65 yrs

32% T2D

31% 3-vessel CAD

EMPACT-MI revealed similar rates of comorbidities, background GDMT, statin and antiplatelet therapy, and revascularization compared to PARADISE-MI

EMPACT-MI includes participants across a spectrum of relevant characteristics, including a wide range of acute signs or symptoms of congestion, the entire spectrum of LVEF, and a range of additional risk factors, which will allow **broad applicability of trial findings to clinical practice**

*Age ≥65 years, LVEF <35%, prior MI, eGFR <60 ml/min/1.73 m², atrial fibrillation, T2D, elevated NT-proBNP/BNP, uric acid, elevated PASP, 3-vessel CAD, PAD.

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