



REWIND

Dulaglutide CV Outcomes Trial

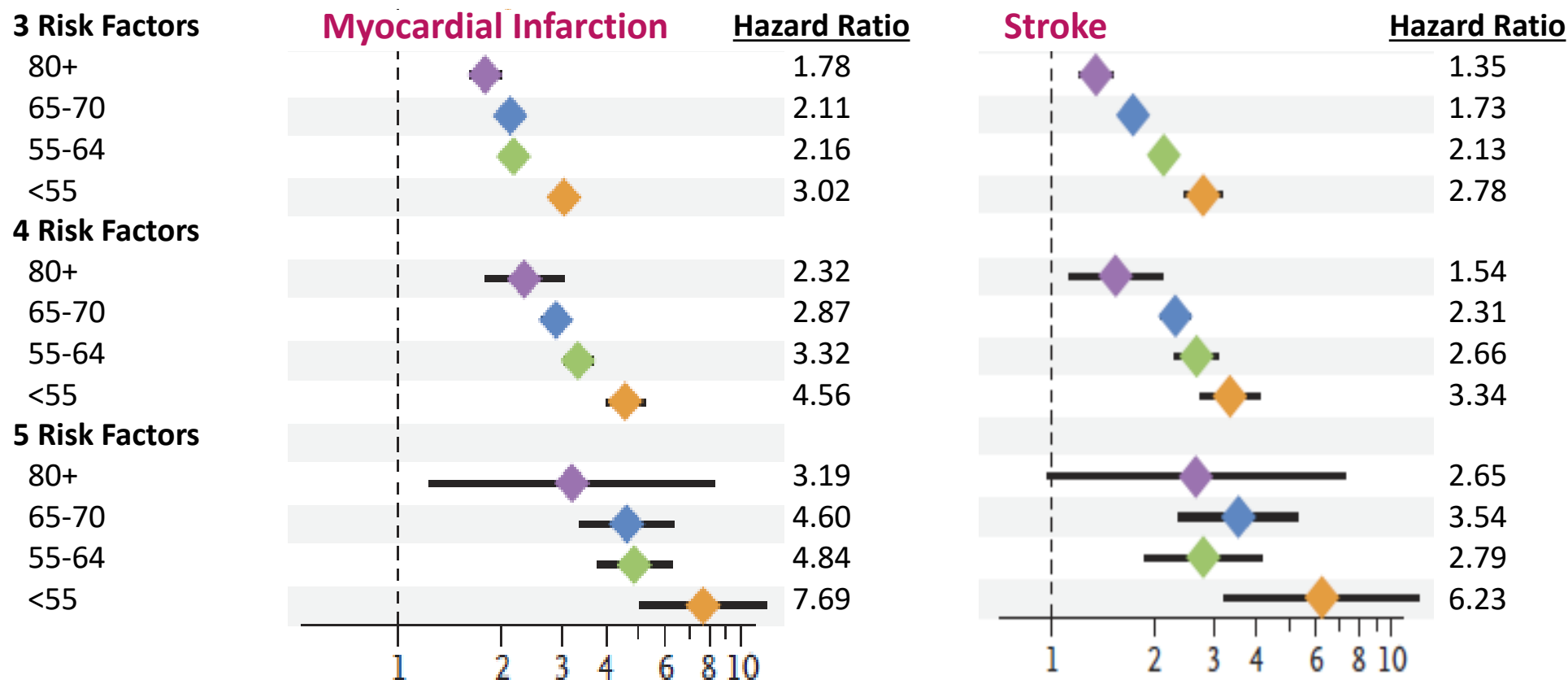
Researching CV **E**vents with a **W**eekly **I**Ncretin in **D**iabetes



Population Health
Research Institute
HEALTH THROUGH KNOWLEDGE

Introduction

- People with type 2 diabetes (DM) → 1.5 to 2-fold higher risk of CV (cardiovascular) outcomes or death than unaffected people
- The risk rises with # of risk factors (Rawshani et al. NEJM 2018;633)



Introduction

- Large RCTs have reported that 3 GLP-1 RAs (glucagon-like peptide receptor 1 agonists) reduced CV events in people with type 2 DM whose mean HbA1c was $\geq 8.0\%$ & whose annual risk of CV events was $\geq 4\%$
- The CV effects of GLP-1 RAs in people with type 2 DM with a broader range of CV risk & with HbA1c levels more reflective of those in the general population is not known
- Dulaglutide is a GLP-1 RA comprising 2 modified human GLP-1 molecules linked to an IgG4 heavy chain with $t_{1/2} = 5 \text{ d}$
 - Dosed weekly at 0.75 mg or 1.5 mg sc
 - Reduces glucose, BP, weight
 - May have CV benefits similar to other GLP1 RAs

Background: Previous GLP-1 RA Trials

	ELIXA	LEADER	SUSTAIN 6	EXSCEL	HARMONY
N	6068	9340	3297	14752	9463
Drug Tested	Lixisenatide/d	Liraglutide/d	Semaglutide/wk	Exenatide/wk	Albiglutide/wk
Prior CVD	100%	81%	83%	73%	100%
Mean Age	60 y	64 y	54 y	62 y	64 y
Women	30%	36%	39%	38%	31%
Median F/U	2.1 y	3.8 y	2.1 y	3.2 y	1.6 y

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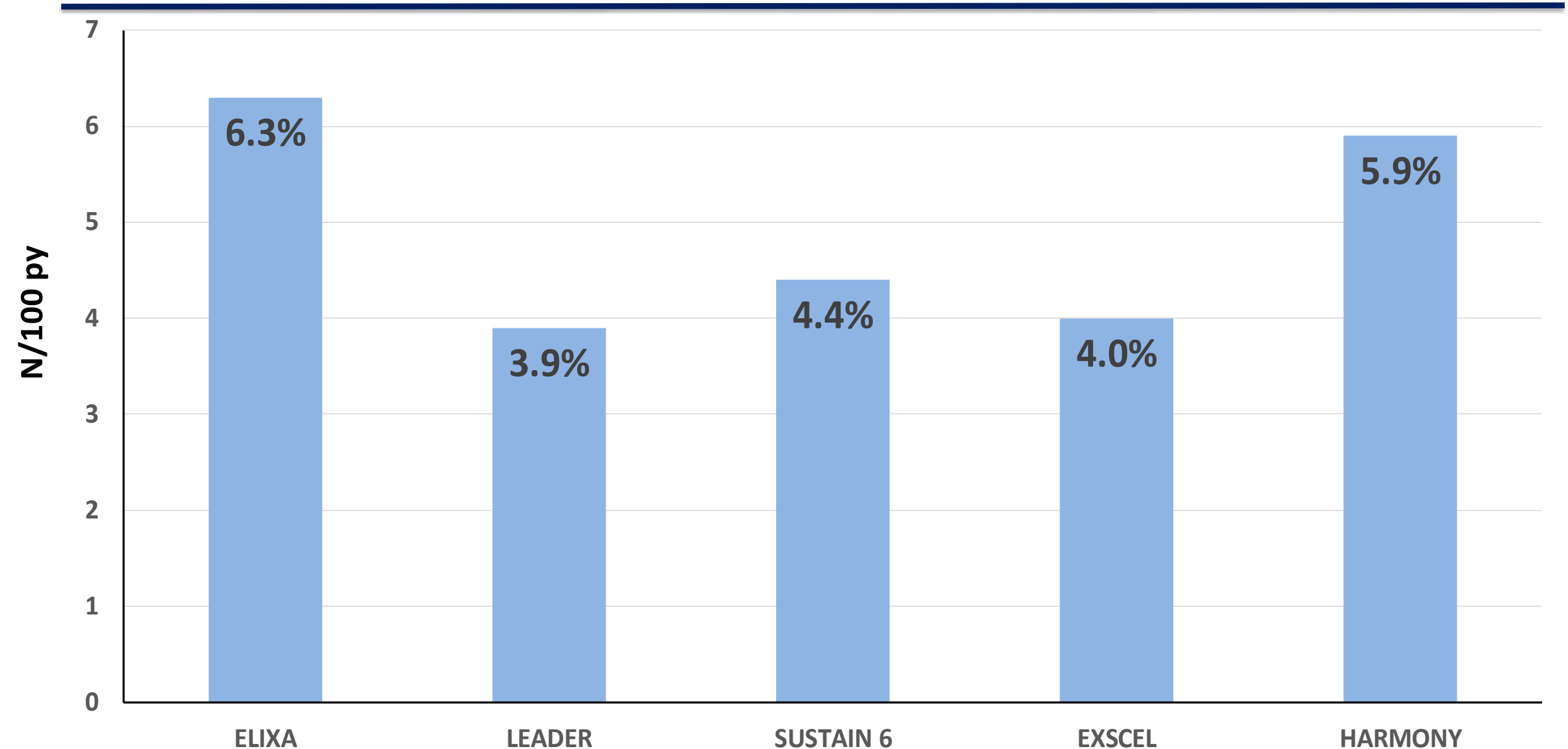
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Women	30%	36%	39%	38%	31%
Median F/U	2.1 y	3.8 y	2.1 y	3.2 y	1.6 y
DM Duration	9.2 y	12.8 y	13.9 y	13.1 y	14.2 y
Baseline A1c	7.7%	8.7%	8.7%	8.1%	8.8%
Baseline eGFR	76	~75	~75	76	79
Insulin Use	39%	45%	58%	46%	59%
Adherence	~75%	84%	88%	76%	86%

Background: Previous GLP-1 RA Trials

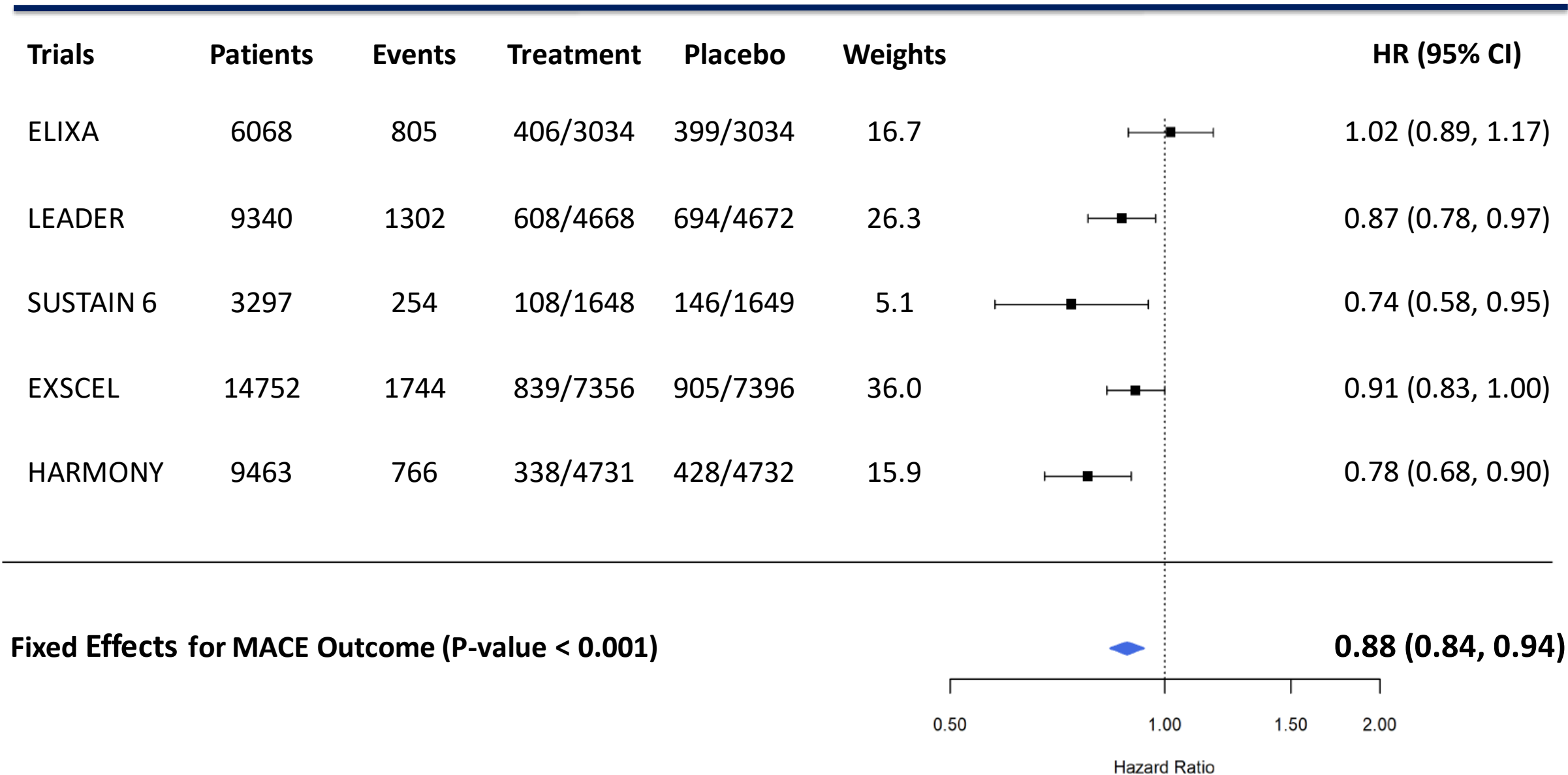
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Annual Placebo MACE Rates by Trial



Meta-analysis of MACE (GLP-1 RA CVOTs)

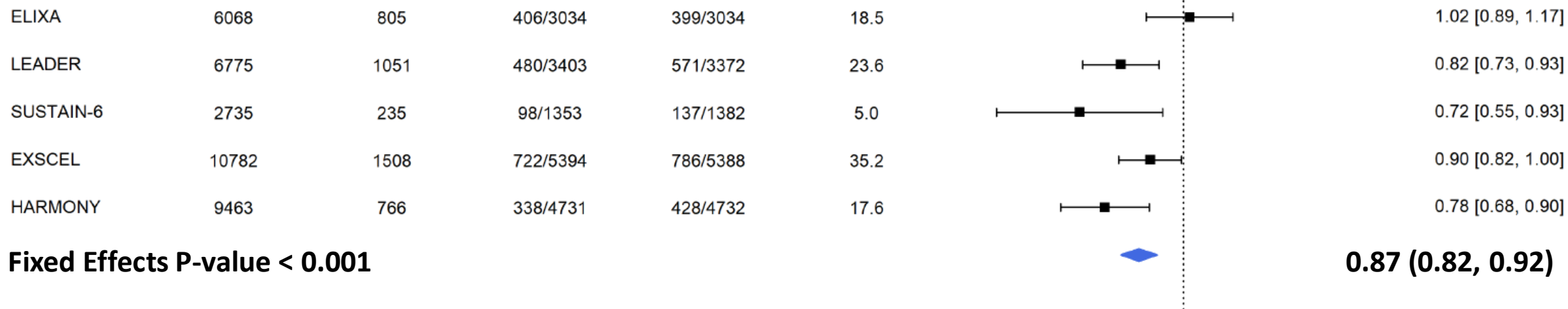
Zelniker et al. Circulation 2019:2022



Meta-analysis of MACE (GLP-1 RA CVOTs)

Zelniker et al. Circulation 2019:2022

Established Atherosclerotic Cardiovascular Disease



Meta-analysis of MACE (GLP-1 RA CVOTs)

Zelniker et al. Circulation 2019:2022

Established Atherosclerotic Cardiovascular Disease

ELIXA	6068	805	406/3034	399/3034	18.5		1.02 [0.89, 1.17]
LEADER	6775	1051	480/3403	571/3372	23.6		0.82 [0.73, 0.93]
SUSTAIN-6	2735	235	98/1353	137/1382	5.0		0.72 [0.55, 0.93]
EXSCEL	10782	1508	722/5394	786/5388	35.2		0.90 [0.82, 1.00]
HARMONY	9463	766	338/4731	428/4732	17.6		0.78 [0.68, 0.90]

Fixed Effects P-value < 0.001



0.87 (0.82, 0.92)

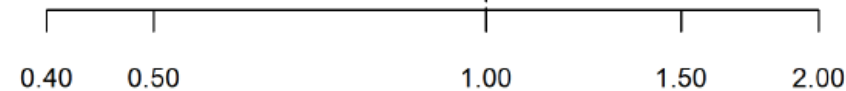
Multiple Risk Factor

LEADER	2565	251	128/1265	123/1300	49.2		1.08 [0.84, 1.38]
SUSTAIN-6	562	19	10/295	9/267	3.8		1.00 [0.41, 2.46]
EXSCEL	3970	236	117/1962	119/2008	47.0		0.99 [0.77, 1.28]

Fixed Effects P-value = 0.71



1.03 (0.87, 1.23)



Hazard Ratio

Research Question

In men & women with established or newly detected type 2 diabetes who have additional CV risk factors...

... does adding a weekly sc. injection of the GLP-1 RA dulaglutide (1.5 mg) to the medical regimen safely reduce serious CV outcomes more than adding a wkly sc. placebo injection?

Key Inclusion Criteria

Type 2 DM - New or previously diagnosed (with stable glucose drugs X 3 mo)

- On 0-2 oral glucose drugs +/- basal insulin or GLP-1 RA

A1C $\leq 9.5\%$ (81 mmol/mol)

BMI ≥ 23 kg/m²

Age ≥ 50 & vascular disease

(prior MI, stroke, revascularization, or unstable angina + ECG changes or PCI or positive imaging)

≥ 55 & subclinical vascular disease

(positive stress test/image, $>50\%$ stenosis, $ABI < 0.9$; $eGFR < 60$; hypertension + LVH, or albuminuria)

≥ 60 & 2 CV risk factors

(tobacco, lipid drug, $LDL-C \geq 3.4$ (130 mg/dl), $HDL-C < 1.0$ (40 mg/dl) for men & < 1.3 (50 mg/dl) for women or $TG \geq 2.3$ (200 mg/dl), ≥ 1 BP drug or $SBP \geq 140$ or $DBP \geq 95$. waist:hip ratio > 1.0 for men & > 0.8 for women)

Trial Outcomes

Primary Composite: First Occurrence of a MACE Outcome

- Nonfatal MI (including silent), nonfatal stroke, or CV death

Secondary Outcomes

- Microvascular composite outcome
 - *Retinopathy:* laser Rx/anti VEGF, vitrectomy
 - *Nephropathy:* clinical proteinuria, 30% eGFR fall, renal replacement Rx
- Hospitalization for unstable angina
- Hospitalization or urgent visit for heart failure
- Each component of the primary outcome
- Total mortality

Other Trial Outcomes

- HbA1c
- Weight & Waist/Hip Ratio
- Expanded Composite CV Outcome: MACE or Hosp for UA
- Revascularization (coronary, carotid, or peripheral)
- Any hospitalization
- Any fracture
- Cholelithiasis
- Erectile dysfunction in men (IIEF)
- Cognitive decline (DSST & MOCA)

Trial Leadership

Academic: Population Health Research Institute (PHRI) & Global Network

HC Gerstein, HM Colhoun, GR Dagenais R Diaz, P Pais, J Probstfield, MC Riddle, L Rydén, D Xavier, A Avezum, J Basile, N Chung, I Conget, WC Cushman, E Franek, N Hancu, M Hanefeld, S Holt, P Jansky, M Keltai, F Lanas, LA Leiter, P Lopez-Jaramillo, EGC Munoz, V Pirags, N Pogossova, PJ Raubenheimer, JE Shaw, W Sheu, T Temelkova-Kurktschiev

Sponsor: Eli Lilly & Company

M Lakshmanan, JS Riesmeyer, C Atisso

Data Collection & Site Management: ICON

Statistical & Organizational: PHRI

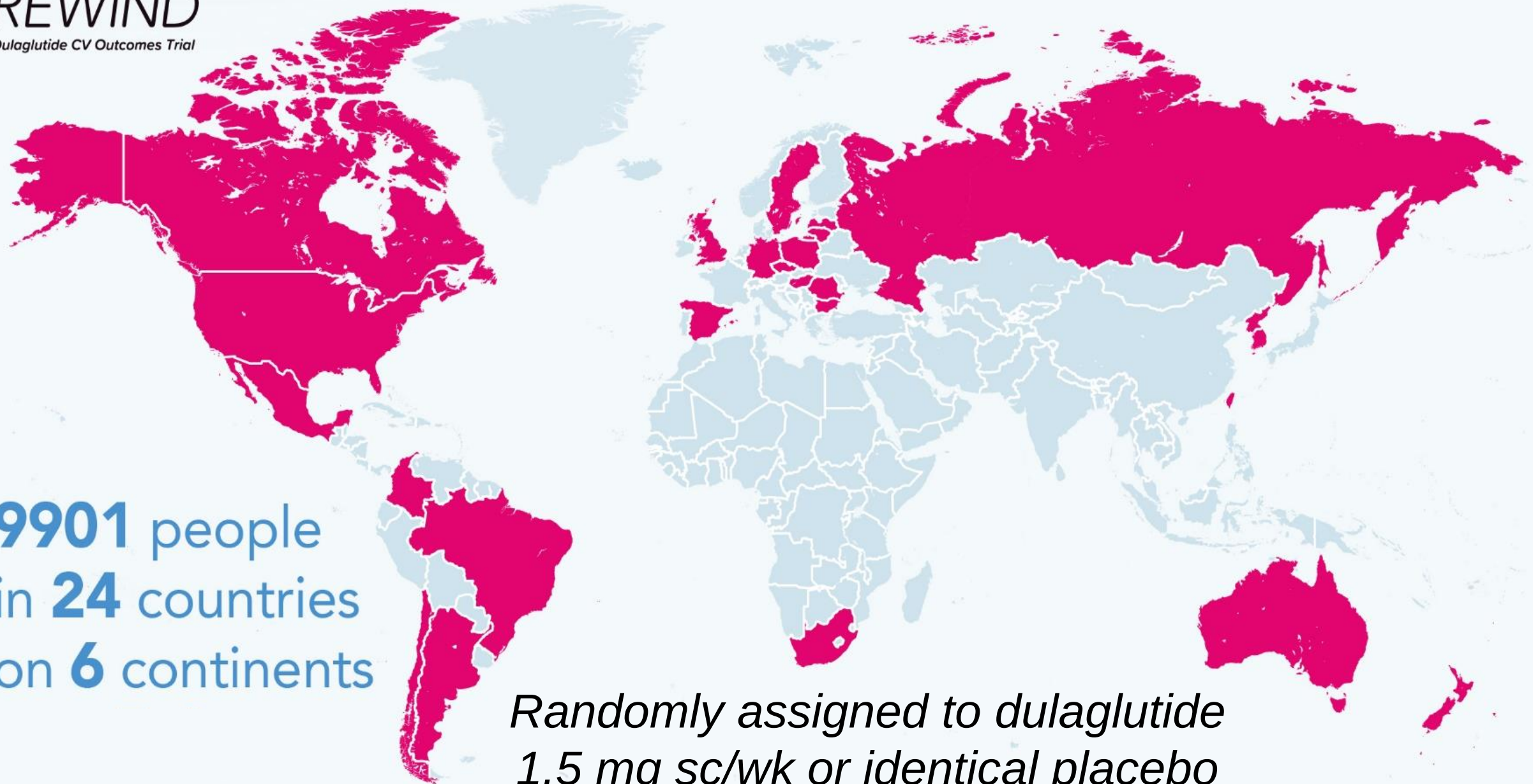
L Dyal, S Hall, P Rao-Melacini, G Wong

Independent Data Monitoring Committee (IDMC)

J Wittes, B Byington, S Griffin, C Hennekens, P Moayyedi

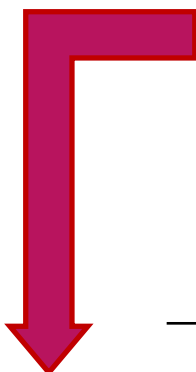
9901 people
in **24** countries
on **6** continents

*Randomly assigned to dulaglutide
1.5 mg sc/wk or identical placebo*



Baseline Characteristics

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
Age (years)	66.2	66.2	66.2
Females (%)	46.4	46.6	46.1
White (%)	75.7	75.9	75.6
Current Tobacco (%)	14.2	14.0	14.4
Prior CV Disease (%)	31.5	31.5	31.4
Prior MI or Ischemic Stroke (%)	20.6	20.8	20.3
Prior Hypertension (%)	93.2	93.0	93.3
Prior Heart Failure (%)	8.6	8.5	8.7



History of MI, ischemic stroke, unstable angina with ECG changes, myocardial ischemia on imaging or stress test, or revascularization (coronary, carotid or peripheral)

Diabetes-related Characteristics

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
HbA1c (%)	7.3	7.3	7.4
DM Duration (y)	10.5	10.5	10.6
Retinopathy (%)	9.0	9.1	8.9
eGFR <60 ml/min/1.73m ² (%)	22.2	21.8	22.6
Albuminuria (%)*	35.0	34.5	35.5
Metformin (%)	81.2	81.3	81.1
Sulfonylurea (%)	46.0	45.9	46.1
Insulin (%)	23.9	24.0	23.7
DPP4i (%)	5.7	5.4	6.0
Thiazolidinedione (%)	1.7	2.0	1.4
Other incl. SGLT2i (%)	0.3	0.3	0.4

* $ACR \geq 3.39 \text{ mg/mmol}$ or 30 mg/g

Baseline Measures – SI Units

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
BMI (kg/m²)	32.3	32.3	32.3
Systolic BP (mm Hg)	137.2	137.1	137.3
Diastolic BP (mm Hg)	78.5	78.4	78.5
Heart Rate (bpm)	71.5	71.4	71.6
Serum Creat (umol/l)	84.1	83.7	84.5
Median eGFR (ml/min/1.73m²)	74.9	75.3	74.7
Median ACR (mg/mmol)	1.82	1.80	1.88
Cholesterol (mmol/L)	4.52	4.52	4.52
LDL (mmol/L)	2.56	2.56	2.56
HDL (mmol/L)	1.18	1.18	1.18
Median Triglycerides (mmol/L)	1.60	1.60	1.60

Baseline Measures – Conventional Units

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
BMI (kg/m²)	32.3	32.3	32.3
Systolic BP (mm Hg)	137.2	137.1	137.3
Diastolic BP (mm Hg)	78.5	78.4	78.5
Heart Rate (bpm)	71.5	71.4	71.6
Serum Creat (mg/dl)	0.95	0.95	0.96
Median eGFR (ml/min/1.73m²)	74.9	75.3	74.7
Median ACR (mg/g)	16.1	15.9	16.6
Cholesterol (mg/dl)	174.5	174.5	174.5
LDL (mg/dl)	98.8	98.8	98.8
HDL (mg/dl)	45.6	45.6	45.6
Median Triglycerides (mg/dl)	141.6	141.6	141.6

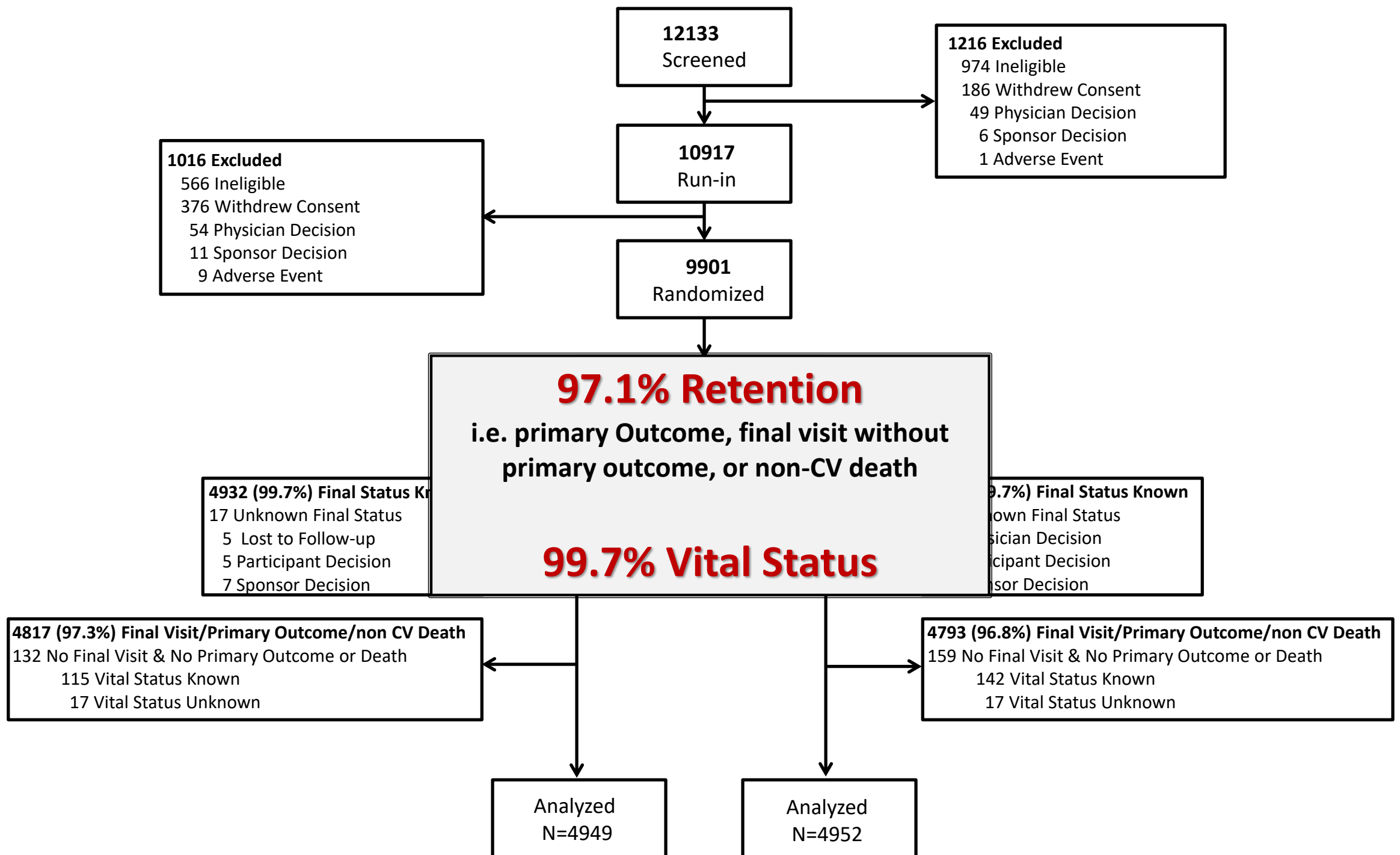
Baseline use of CV Drugs

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
ACE/ARB (%)	81.5	81.0	82.0
Beta Blocker (%)	45.6	45.2	45.9
Other Blood Pressure (%)	56.6	55.9	57.2
Statin (%)	66.1	66.3	66.0
Fibrate (%)	9.1	9.1	9.0
Antiplatelet (%)	54.0	53.8	54.1

Follow-up Time, Retention, Adherence

Median follow-up period = 5.4 years (IQR 5.1, 5.9)

Person years of follow-up = 51820



Study Drug Adherence

In 9901 Participants followed for a Median of 5.4 years

	Dulaglutide N = 4949	Placebo N =4952
% F/U Time on Study Drug	82.2%	83.1%

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	Dulaglutide N = 4949	Placebo N =4952
% F/U Time on Study Drug	82.2%	83.1%
Study Drug @ Last Visit	73.2%	71.1%

Study Drug Adherence

In 9901 Participants followed for a Median of 5.4 years

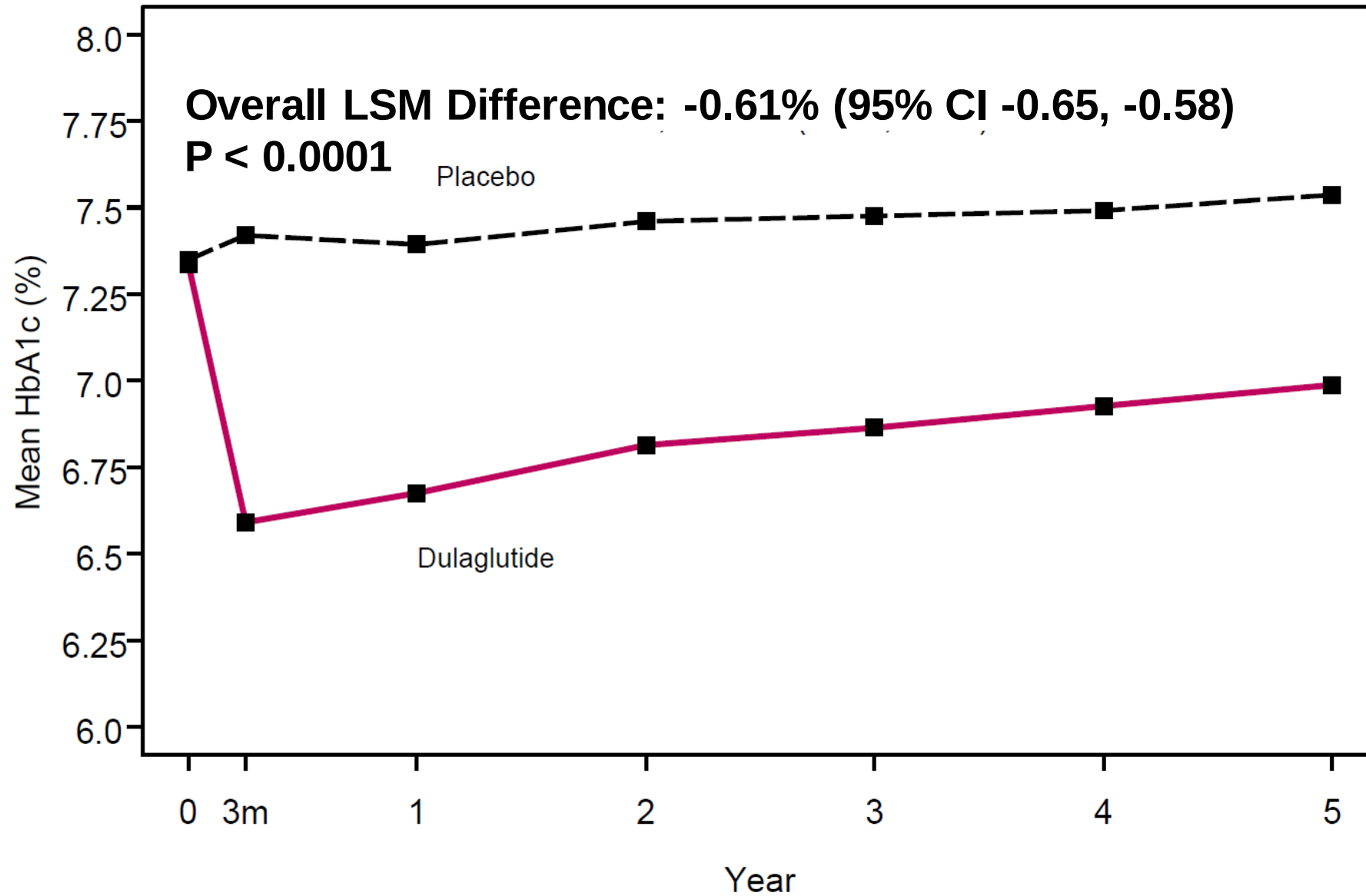
	Dulaglutide N = 4949	Placebo N =4952
% F/U Time on Study Drug	82.2%	83.1%
Study Drug @ Last Visit	73.2%	71.1%
Never Stopped at All	57.7%	56.2%

Study Drug Adherence

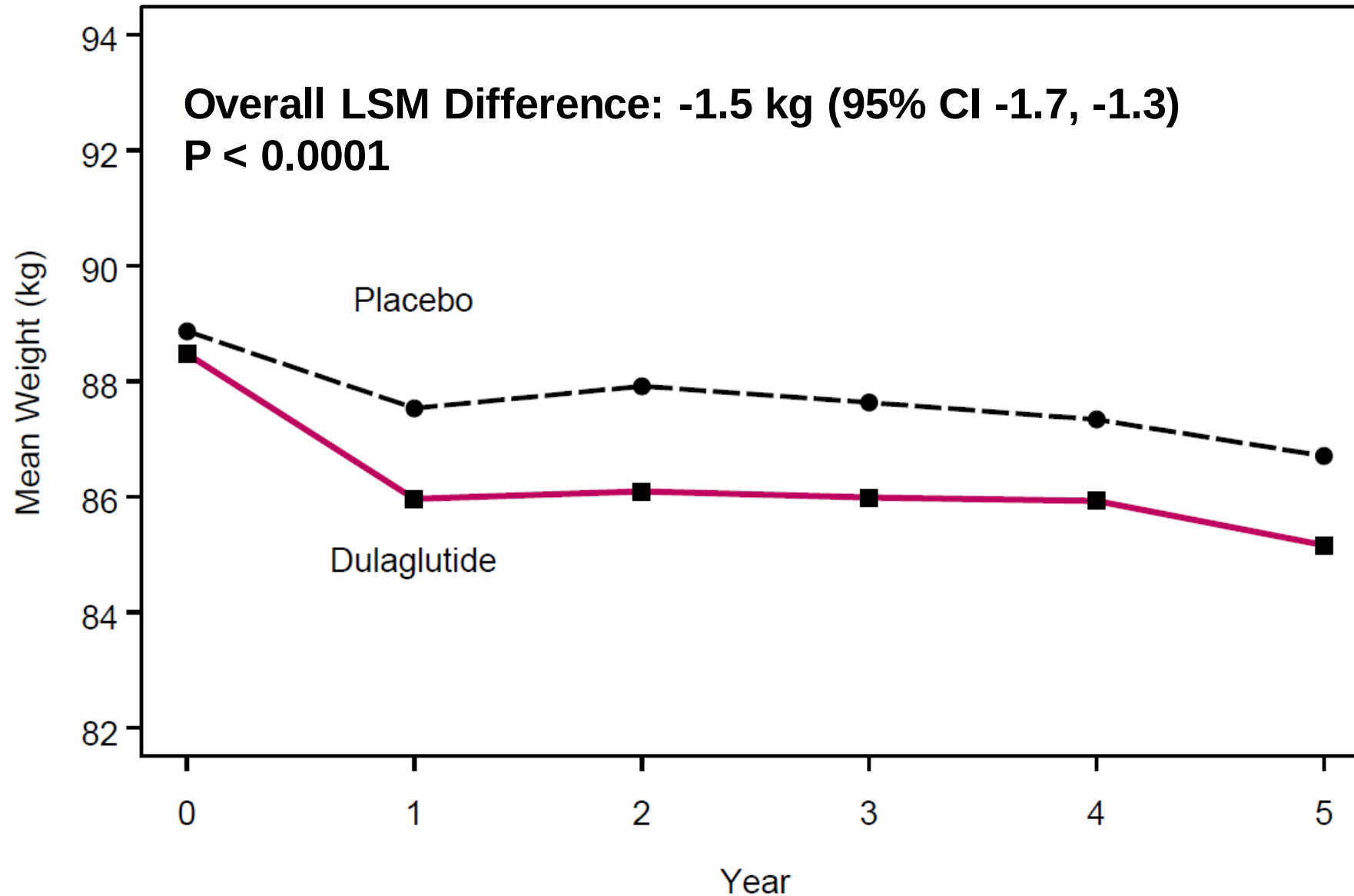
In 9901 Participants followed for a Median of 5.4 years

	Dulaglutide N = 4949	Placebo N =4952
% F/U Time on Study Drug	82.2%	83.1%
Study Drug @ Last Visit	73.2%	71.1%
Never Stopped at All	57.7%	56.2%
Stopped due to an AE	11.0%	7.5%

Dulaglutide's Effect on HbA1c

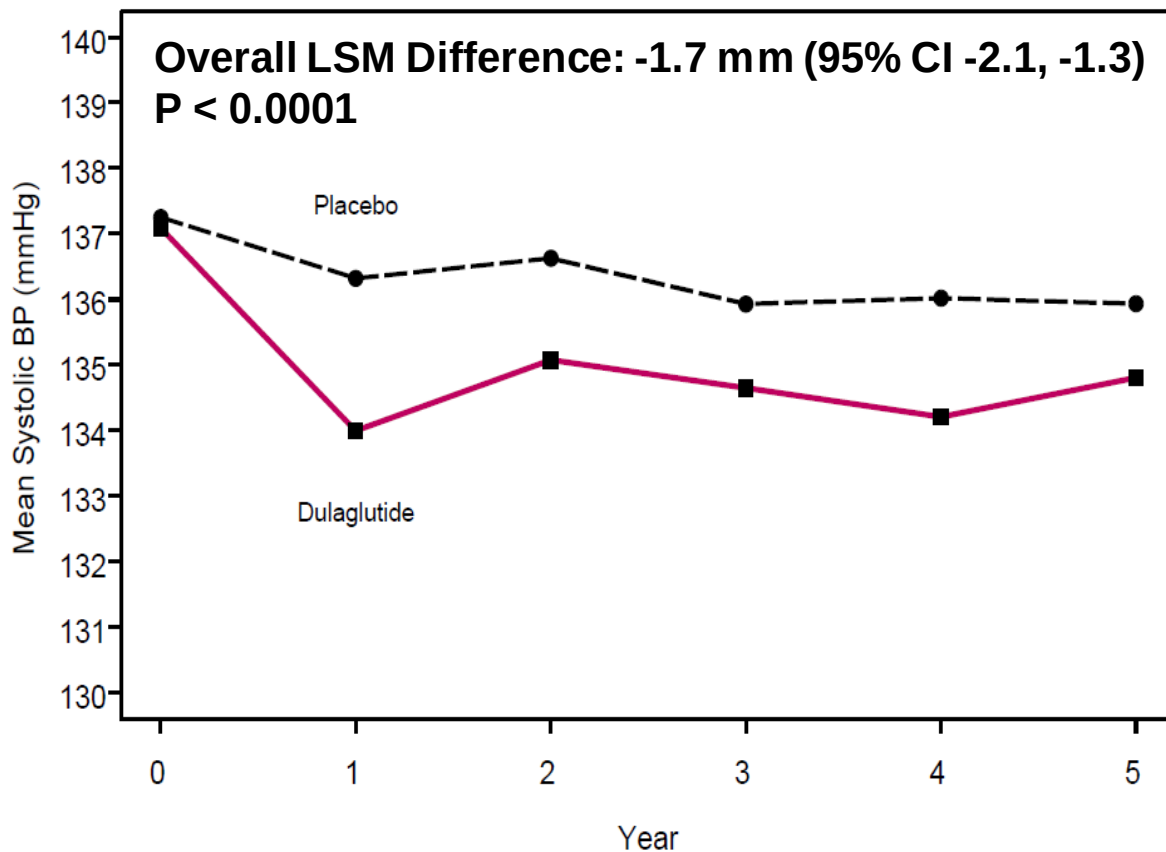


Dulaglutide's Effect on Weight

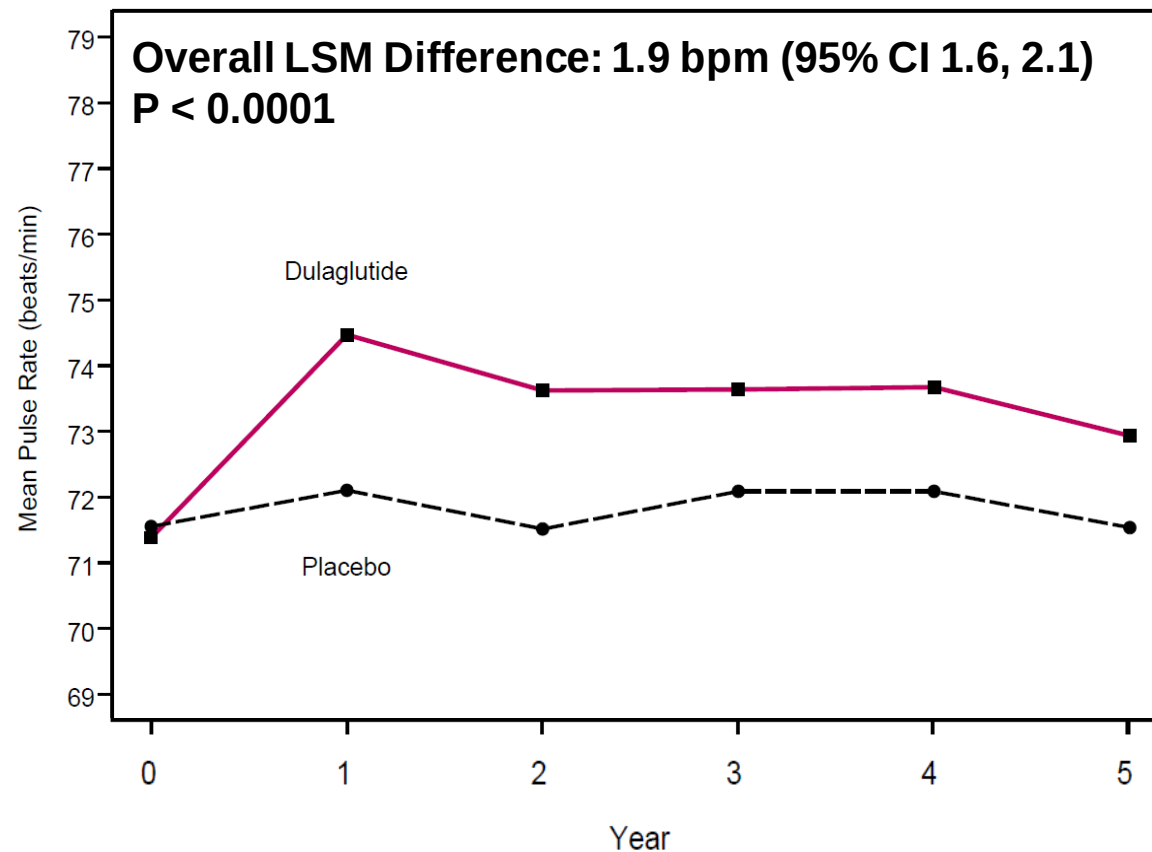


Dulaglutide's Effect on SBP & Heart Rate

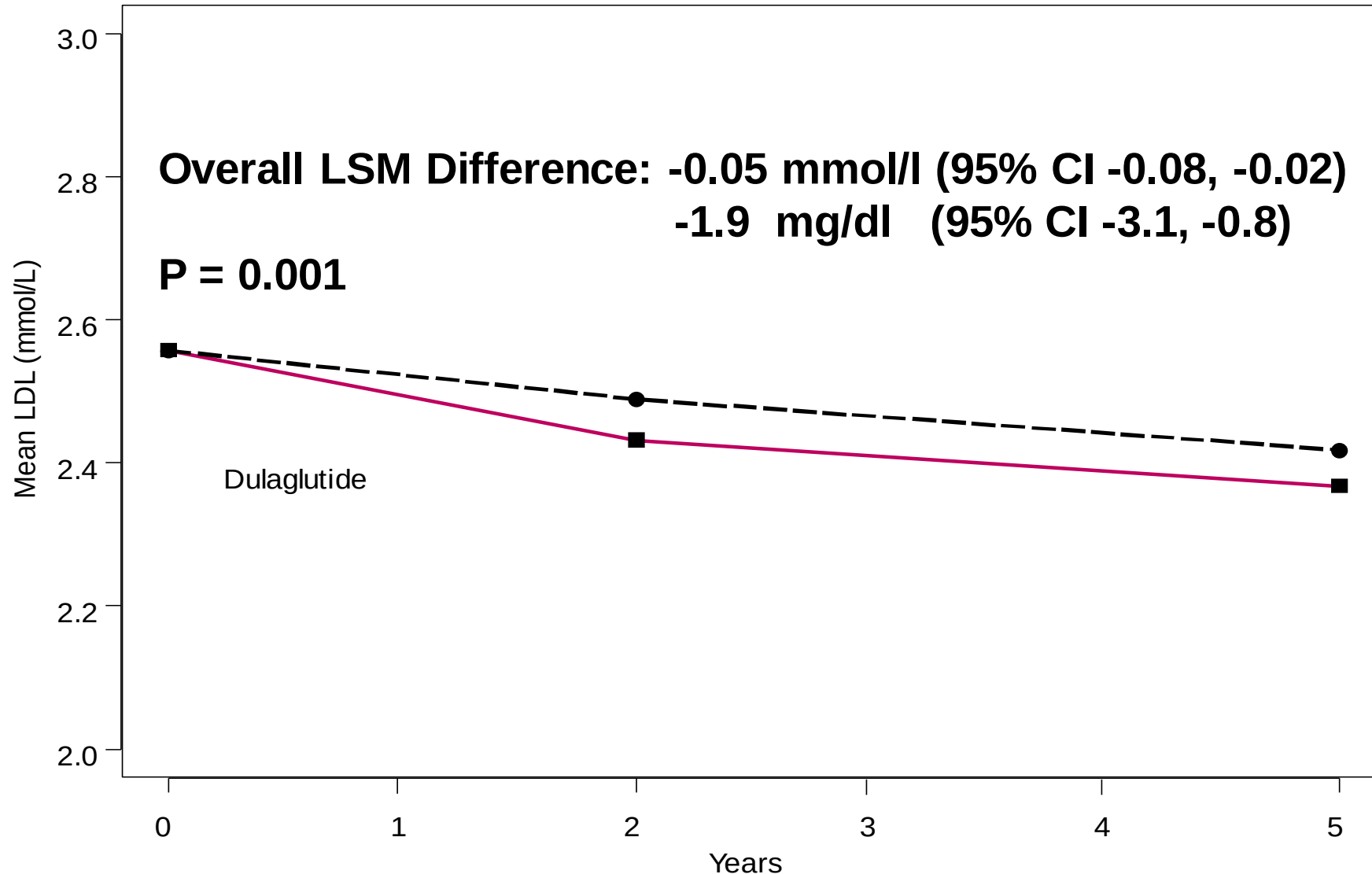
Systolic Blood Pressure



Heart Rate



Dulaglutide's Effect on LDL Cholesterol



Summary of Effect on Clinical Measures

Measurement	Dulaglutide	Placebo	Difference	P
HbA1c (%)	-0.46	0.16	-0.61	<0.0001
LDL (mmol/l)	-0.15	-0.09	-0.05	0.001
Weight (kg)	-2.95	-1.49	-1.46	<0.0001
Body Mass Index	-1.08	-0.55	-0.53	<0.0001
Waist:Hip (Men)	-0.007	-0.004	-0.003	0.04
Waist:Hip (Women)	-0.005	0.0	-0.005	0.009
Systolic BP (mm Hg)	-3.15	-1.44	-1.70	<0.0001
Mean BP (mm)	-2.34	-1.85	-0.49	<0.0001
Heart Rate (bpm)	2.95	1.09	1.87	<0.0001

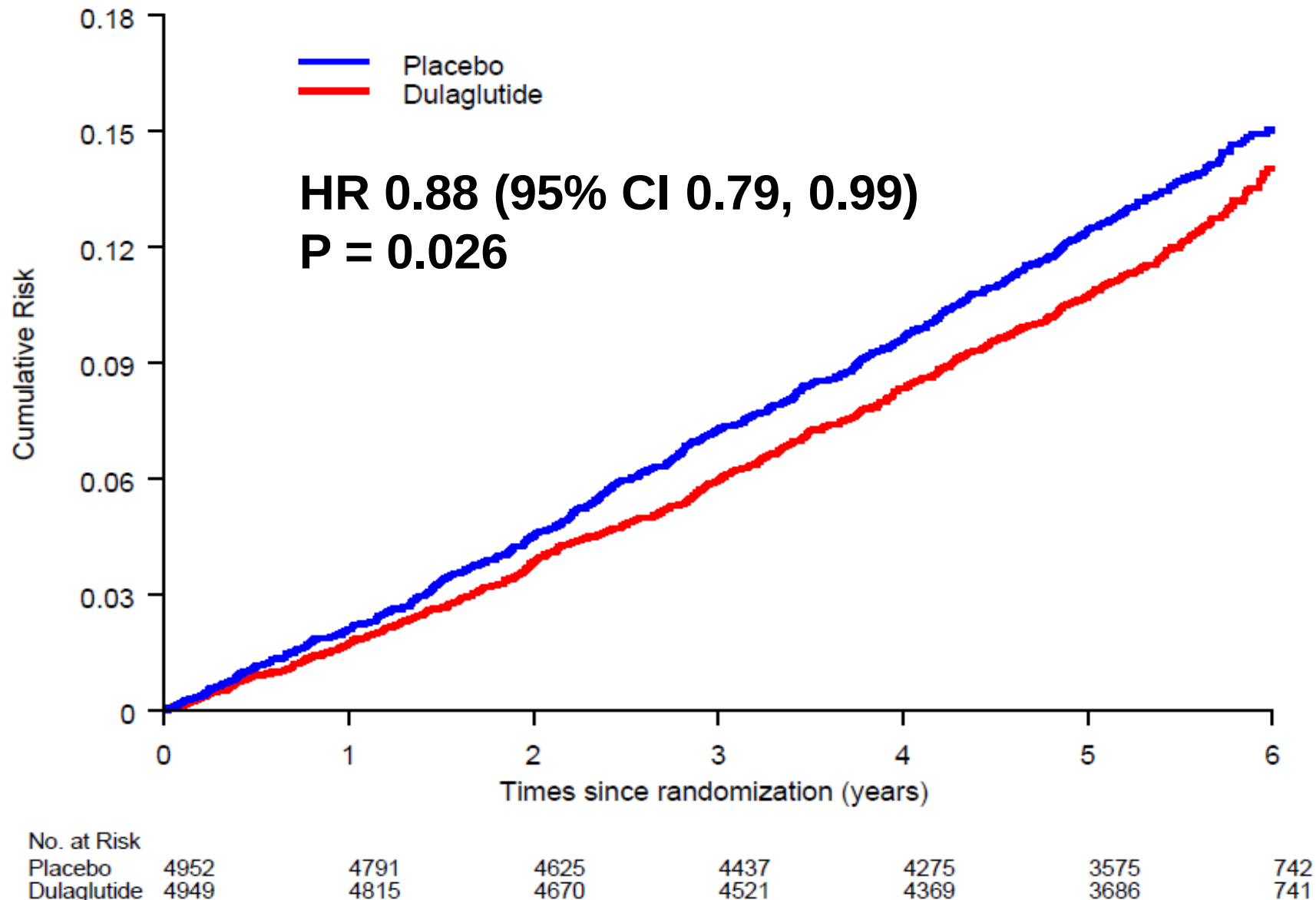
Research Question

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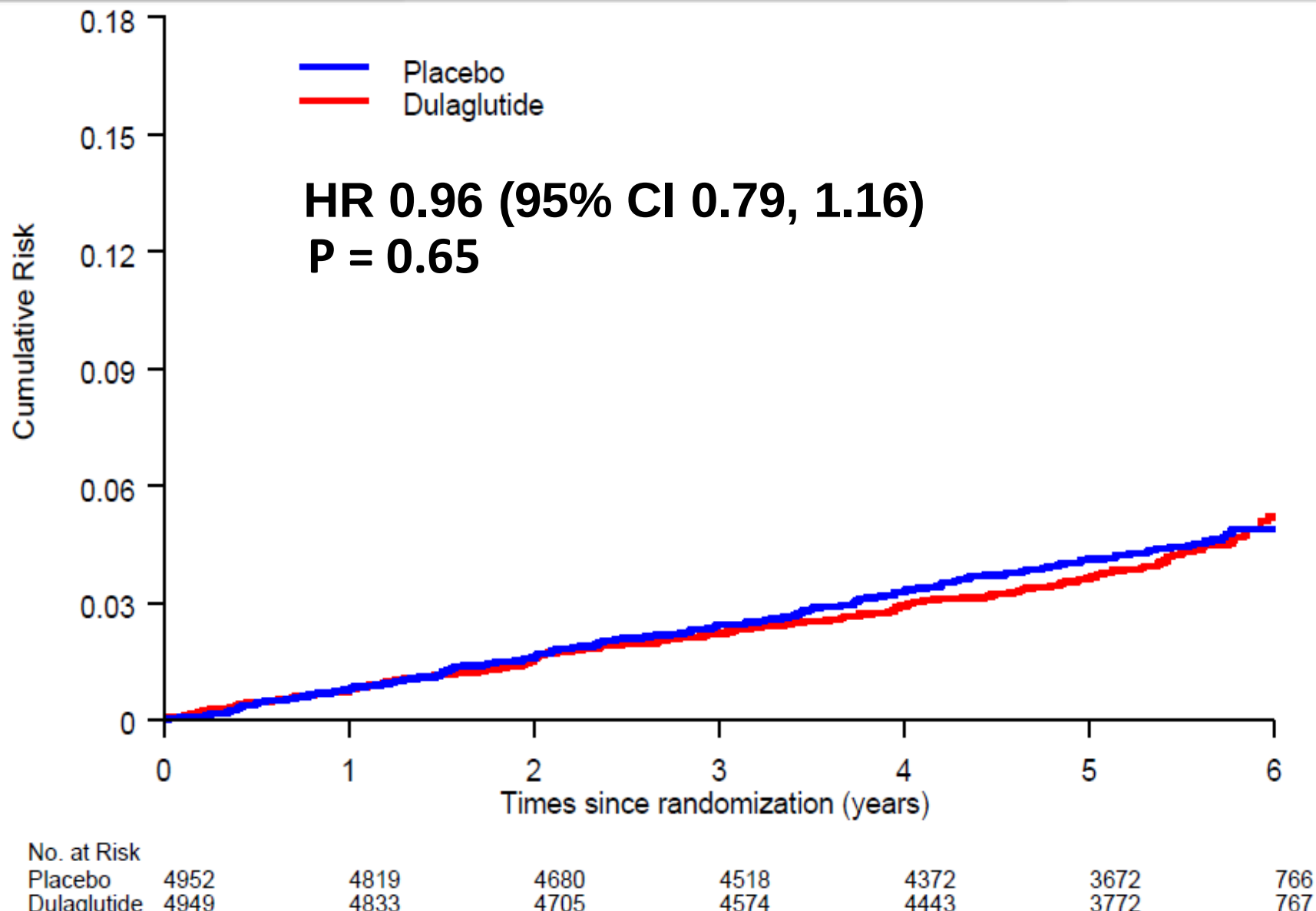
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Dulaglutide's Effect on the CV Composite

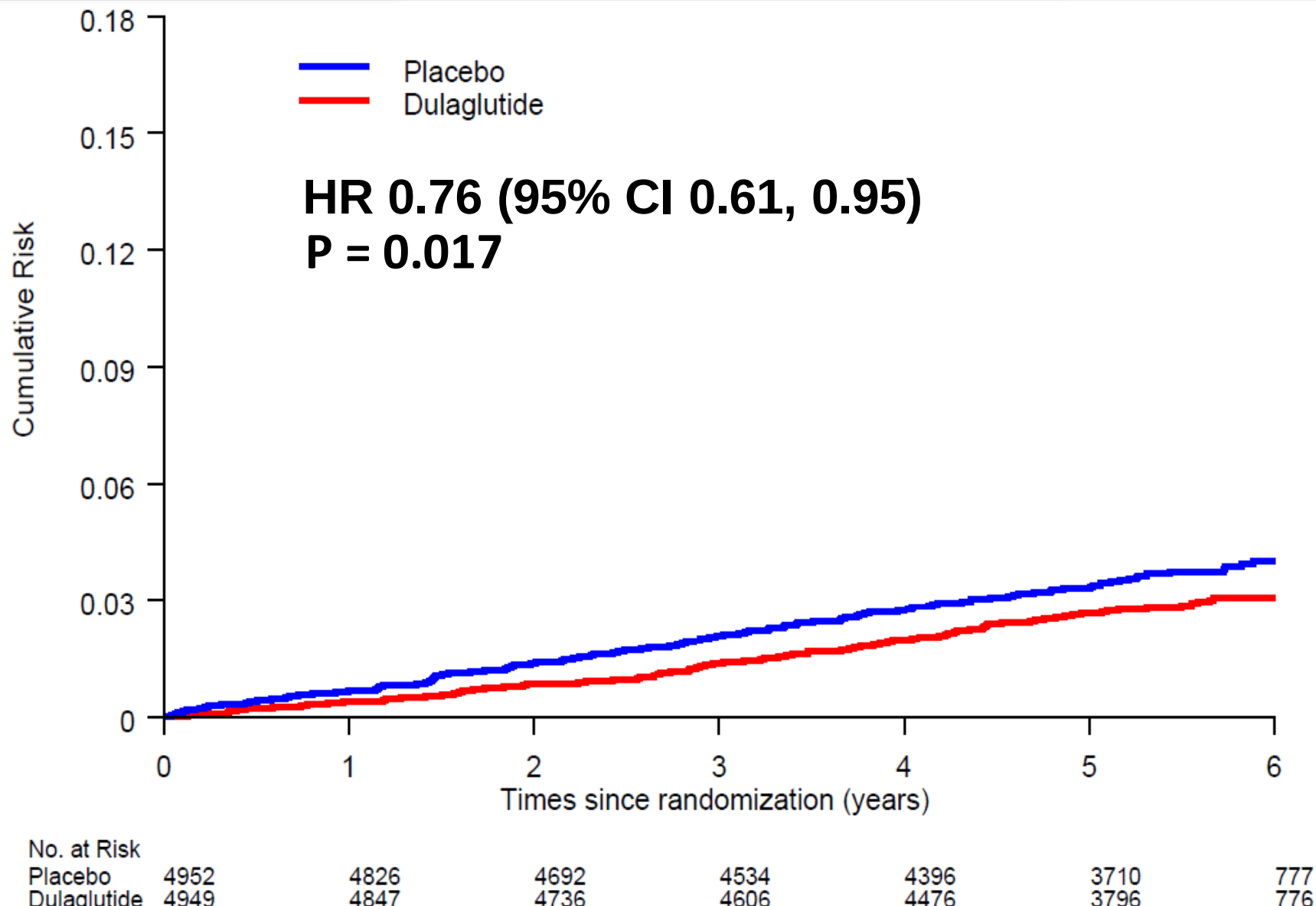
Primary Outcome: 1st Occurrence of Nonfatal MI, Nonfatal Stroke, CV Death



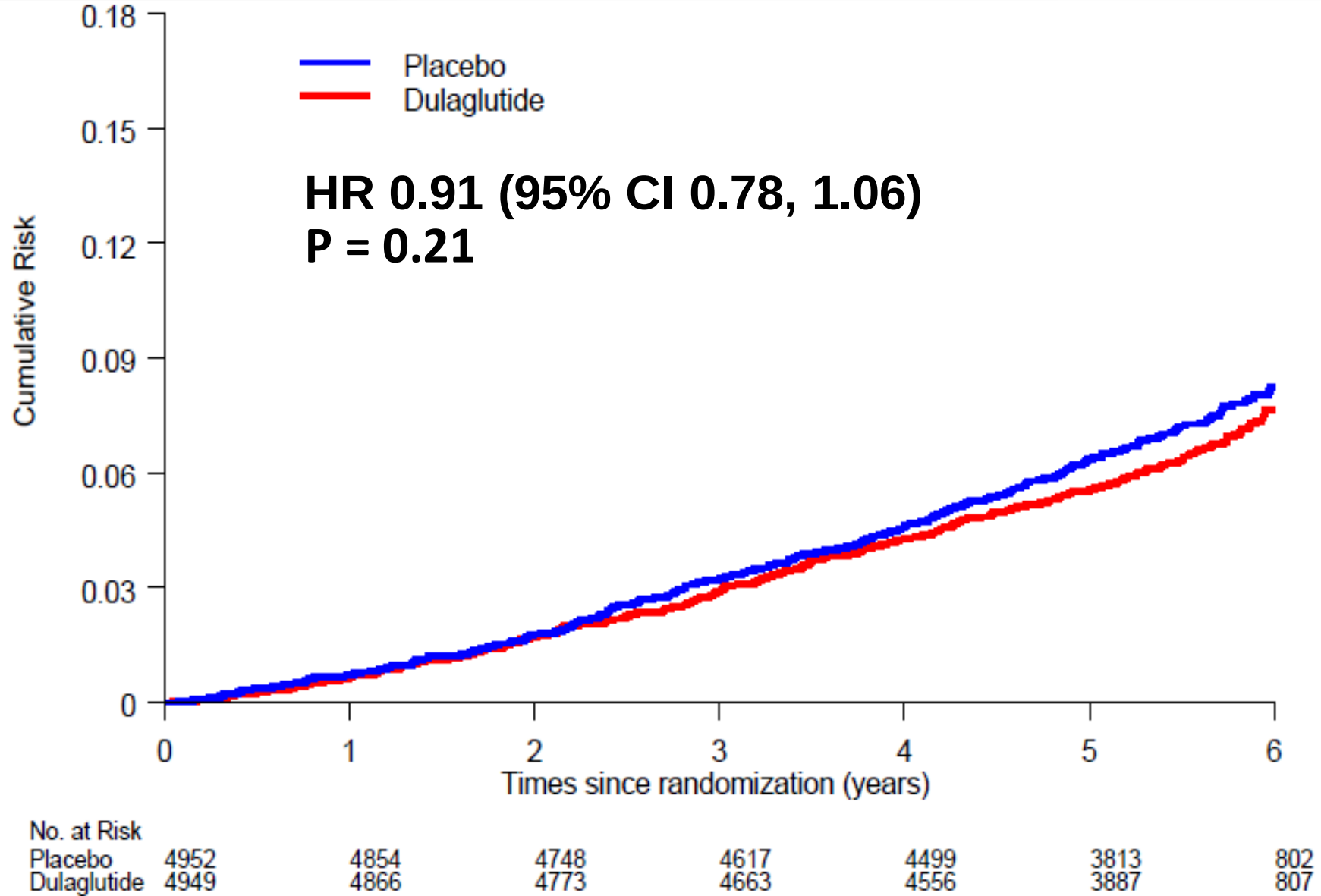
Dulaglutide's Effect on Nonfatal MI



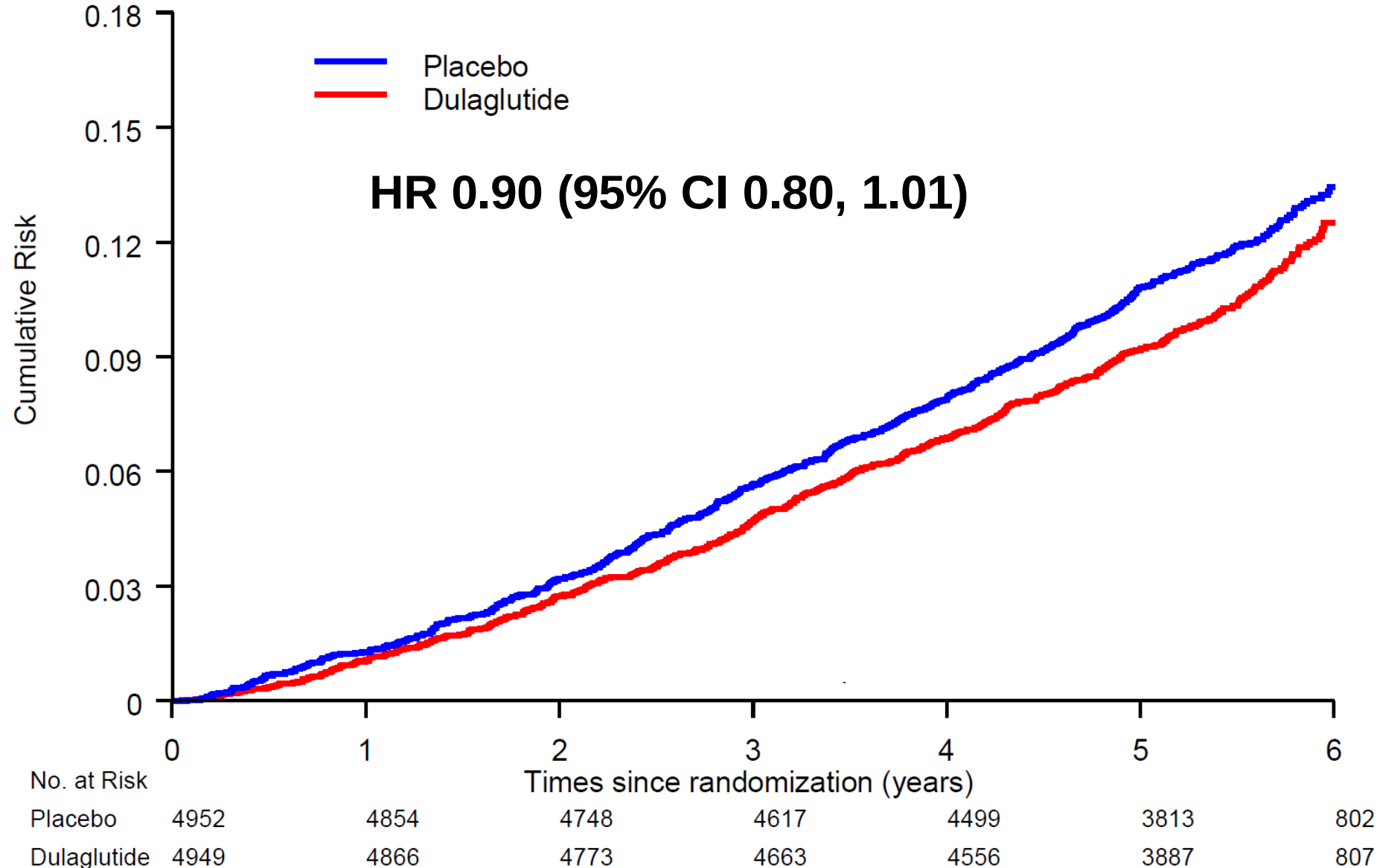
Dulaglutide's Effect on Nonfatal Stroke



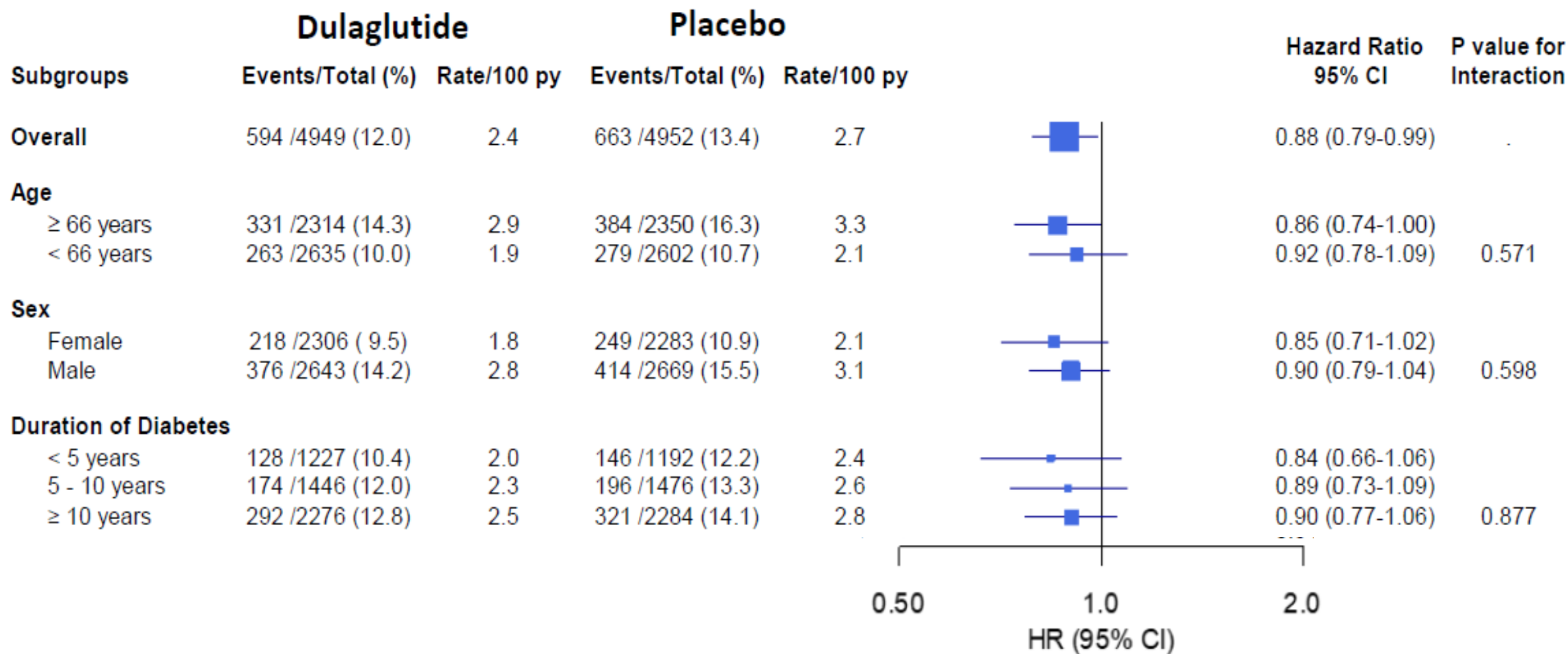
Dulaglutide's Effect on CV Death



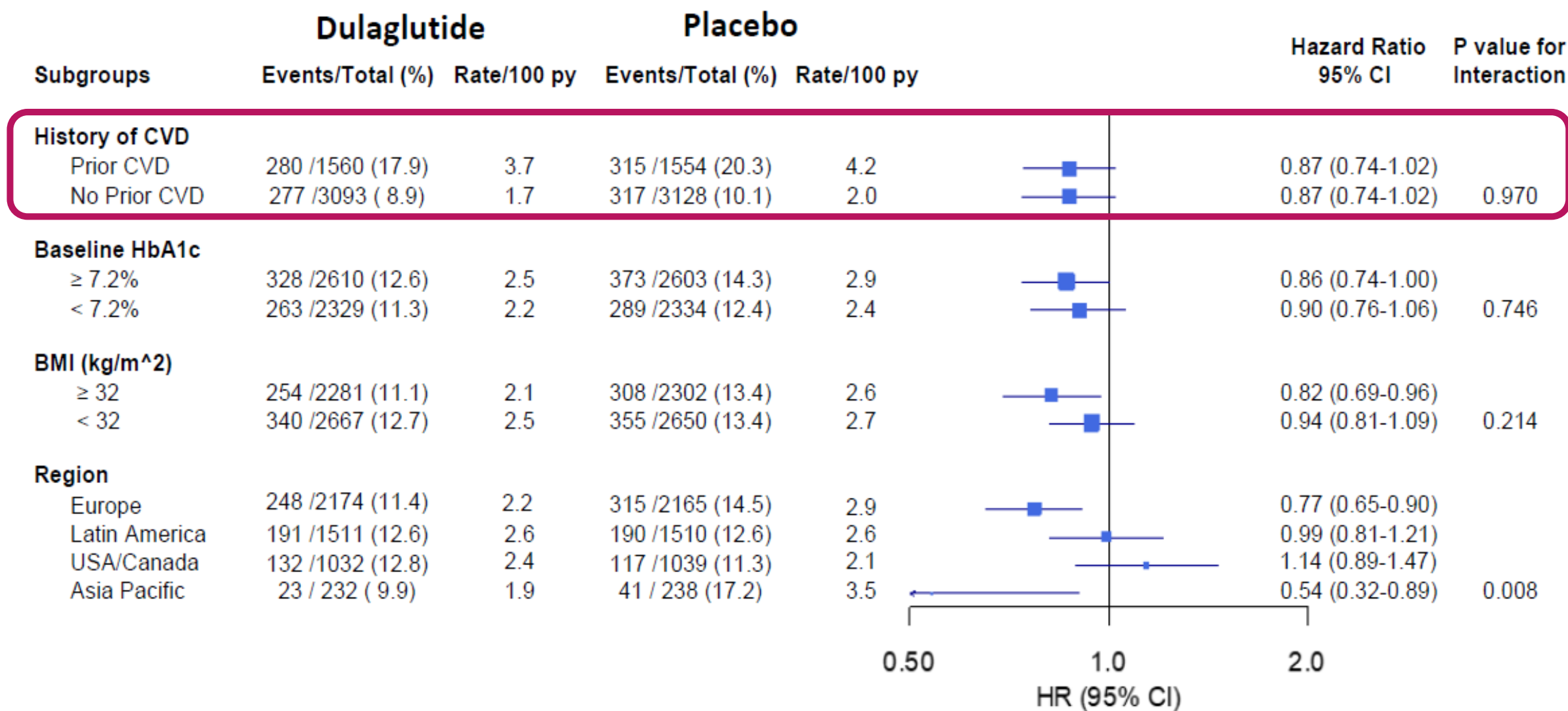
Dulaglutide's Effect on All-Cause Death



CV Composite in Prespecified Subgroups



CV Composite in Prespecified Subgroups



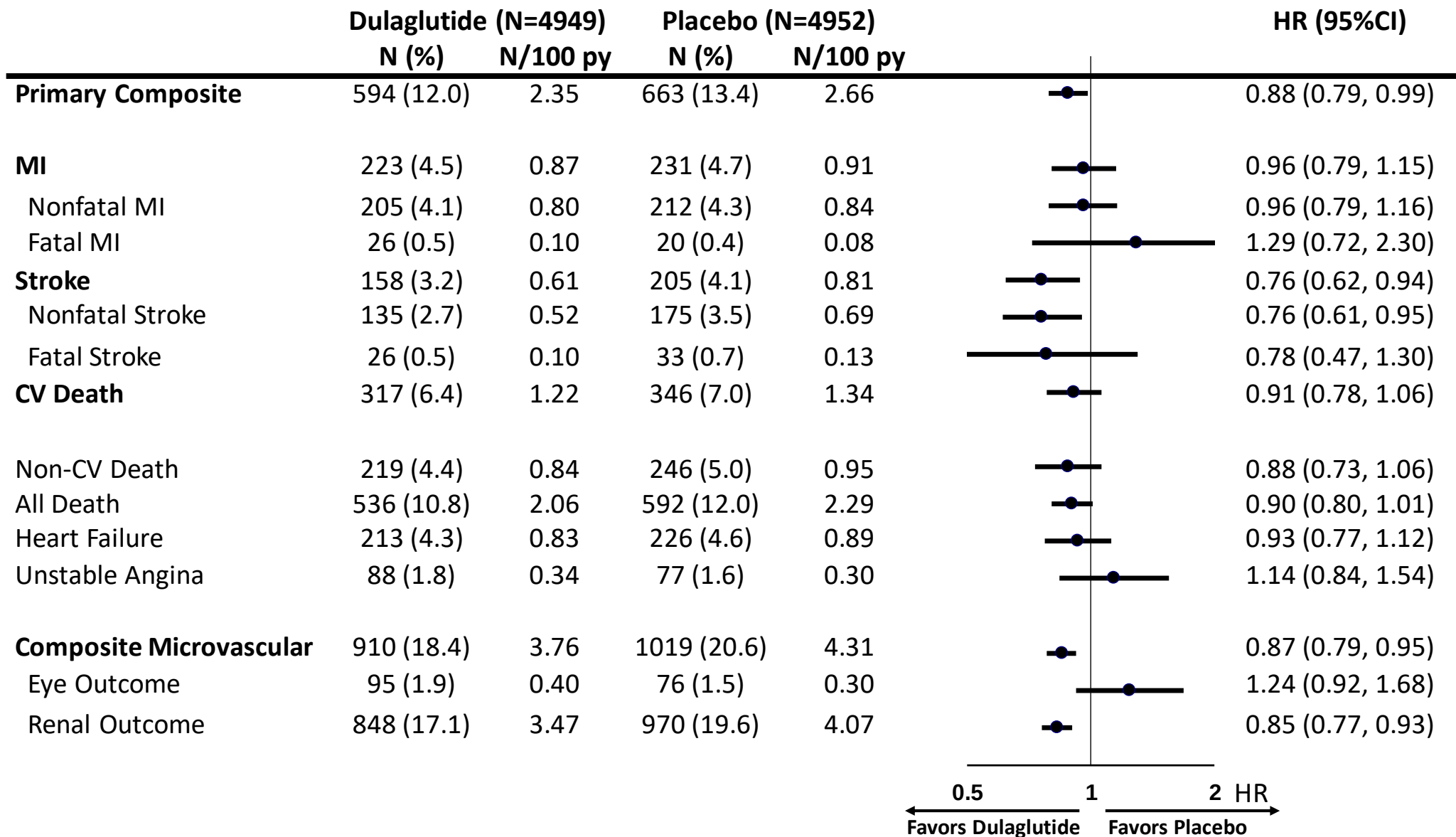
CV Composite in Other Subgroups

	Dulaglutide (N/100 py)	Placebo (N/100 py)	HR (95%CI)	P Int
Overall	2.35	2.66	0.88 (0.79, 0.99)	
White	2.40	2.67	0.90 (0.79, 1.02)	0.77
Black	2.30	2.98	0.77 (0.51, 1.17)	
Asian	1.97	2.80	0.71 (0.40, 1.24)	
Other	2.23	2.42	0.92 (0.67, 1.28)	

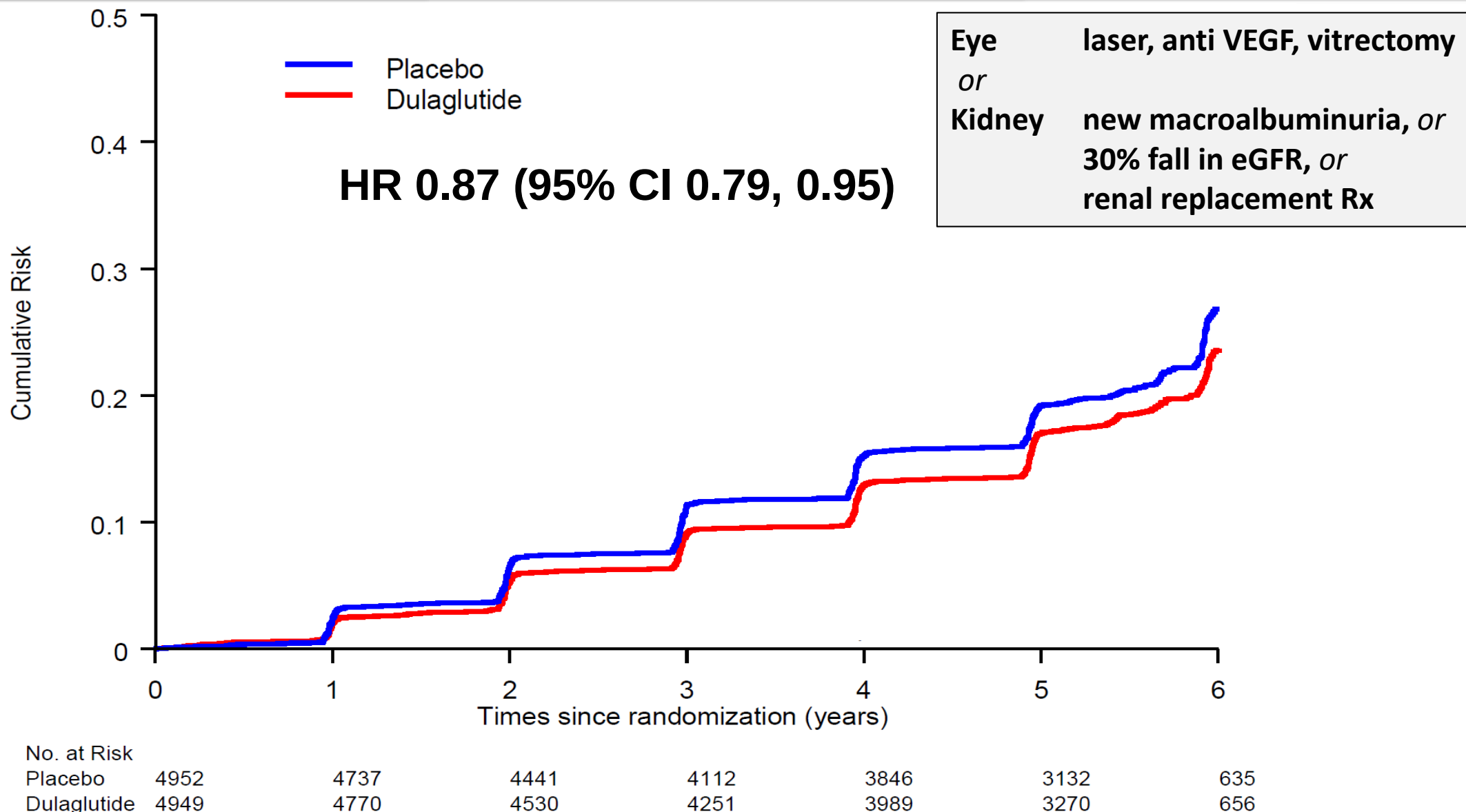
CV & Diabetes Medications at Last Visit

	Dulaglutide N = 4949	Placebo N = 4952
Metformin (%)	70	73
Sulfonylurea (%)	33	38
Insulin (%)	27	36
SGLT2i (%)	5	7
GLP-1 RA (%)	1	1
Thiazolidinedione (%)	2	2
Statin (%)	67	68
ARB or ACEi (%)	76	78
ASA (%)	50	51
Beta Blocker (%)	47	47

Summary: Dulaglutide & Outcomes



Microvascular Composite Outcome



Baseline Renal Characteristics

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
Age (years)	66.2	66.2	66.2
Females (%)	46.4	46.6	46.1
White (%)	75.7	75.9	75.6
Prior CV Disease (%)	31.5	31.5	31.4
ACE/ARB (%)	81.5	81.0	82.0
Mean HbA1c (%)	7.3	7.3	7.4
Mean Blood Pressure (mm Hg)	137/79	137/78	137/79
Mean eGFR (ml/min/1.73m²)	77	77	77
Median Urine ACR (mg/mmol)	1.82	1.80	1.88

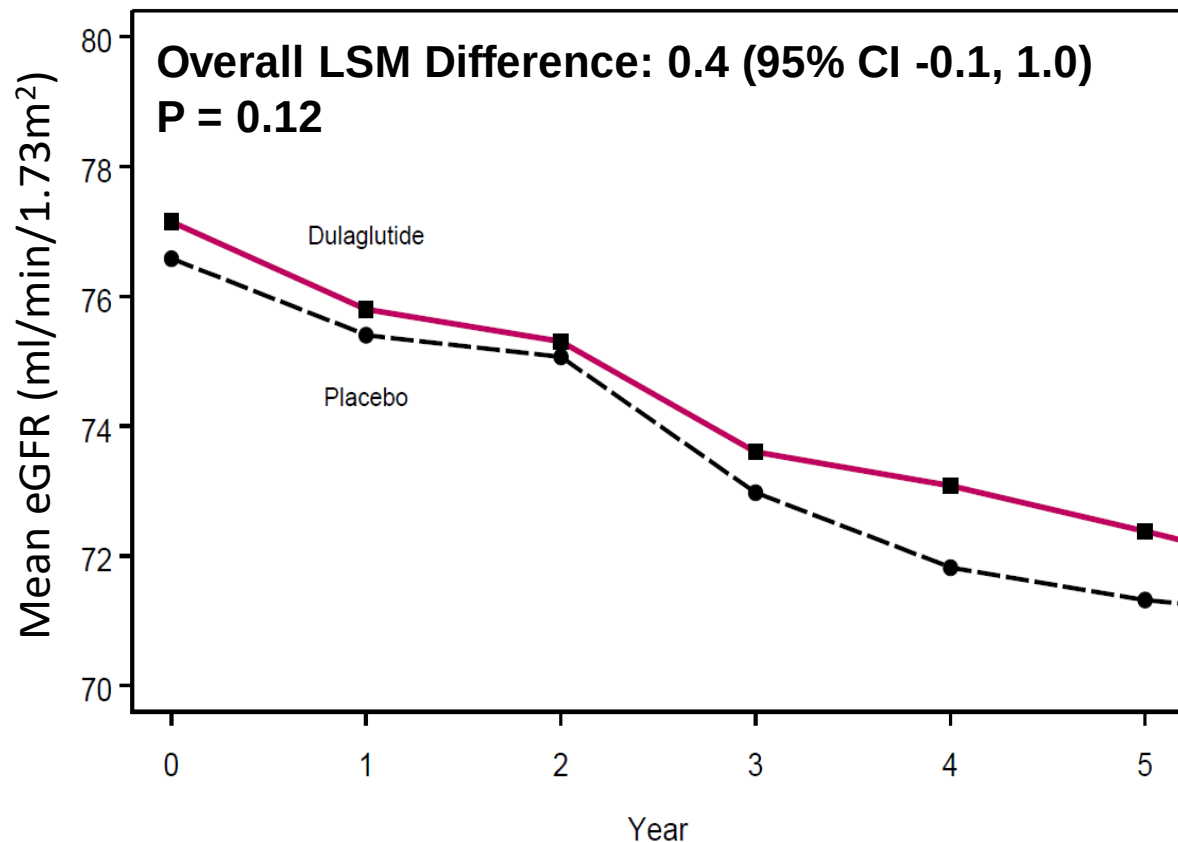
Baseline Renal Characteristics

	All Participants N=9901	Dulaglutide N=4949	Placebo N=4952
eGFR ≥ 90 (%)	25.6	26.2	25.0
eGFR 60-89 (%)	49.5	49.2	49.9
eGFR 30-59 (%)	21.1	20.8	21.5
eGFR < 30 (%)	1.1	1.0	1.1
Albuminuria^a (%)	35.0	34.5	35.5
Microalbuminuria^b (%)	27.0	26.8	27.3
Macroalbuminuria^c (%)	8.0	7.7	8.3
eGFR < 60 & albuminuria (%)	10.5	10.0	11.0
eGFR < 60 & no albuminuria (%)	10.5	10.5	10.5
eGFR ≥ 60 & albuminuria (%)	24.0	23.9	24.1
eGFR ≥ 60 & no albuminuria (%)	47.0	47.5	46.5

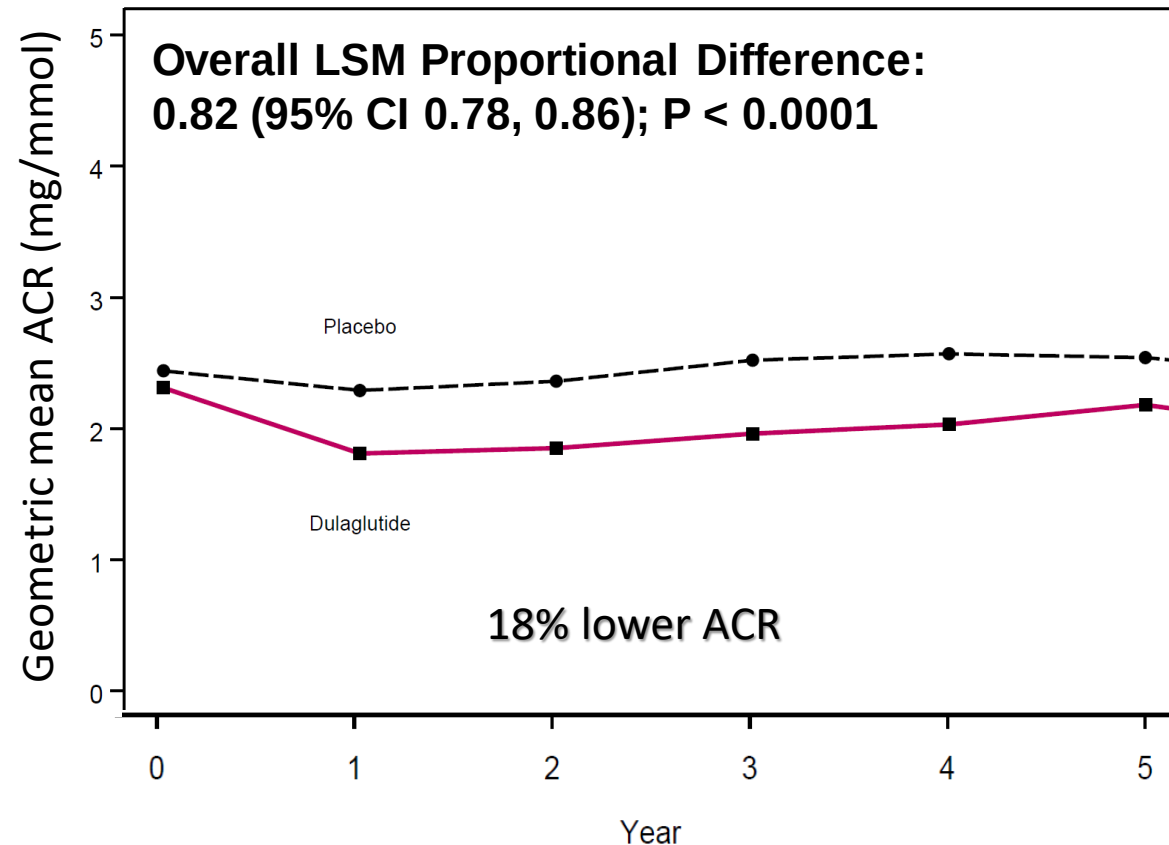
^aACR ≥3.39 mg/mmol (30 mg/g); ^bACR 3.39 - 33.9 mg/mmol (30-300 mg/g); ^cACR > 33.9 mg/mmol (300 mg/g)

Effect on eGFR & Urine Alb/Creatinine

Estimated GFR

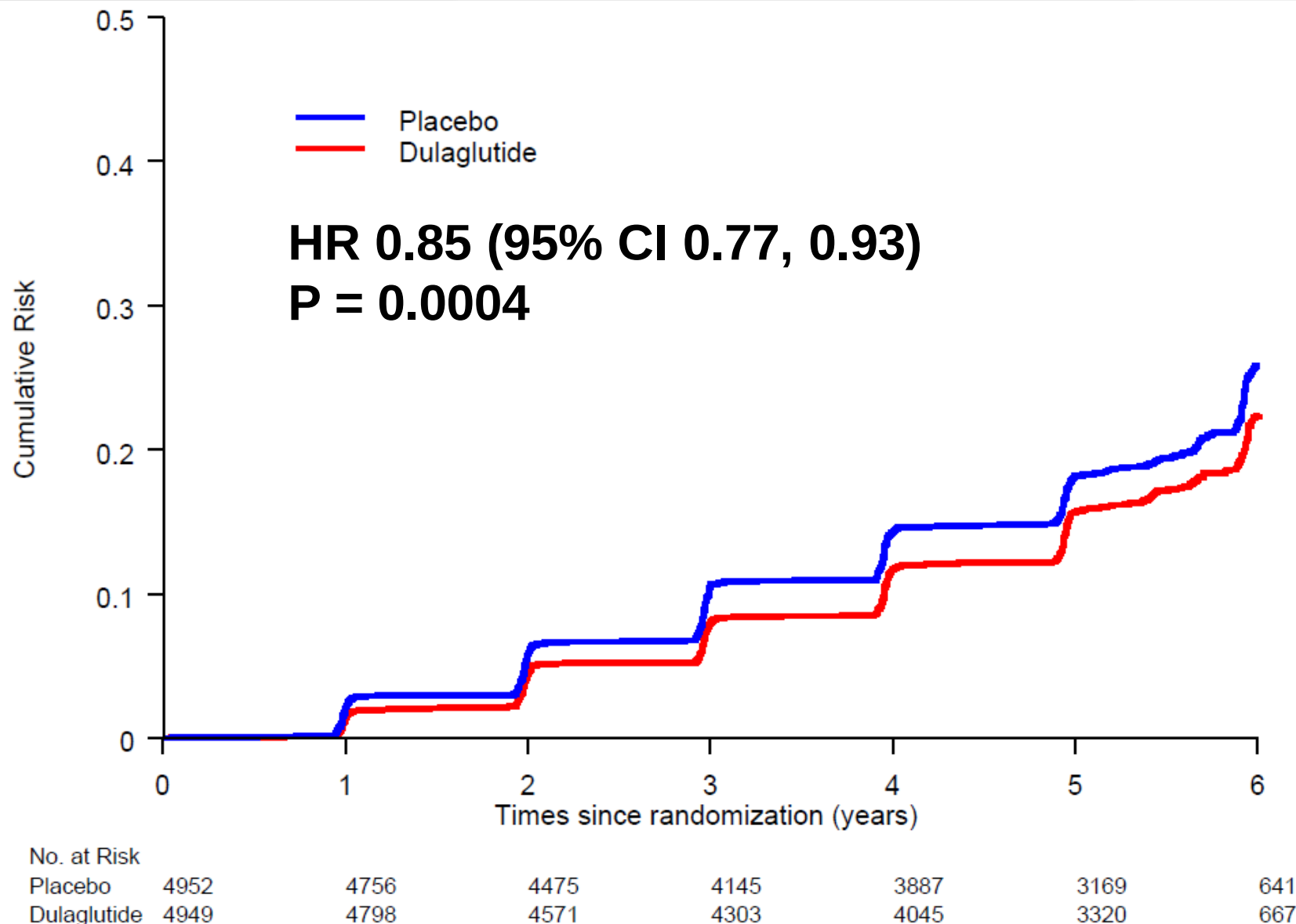


Urine Albumin/Creatinine



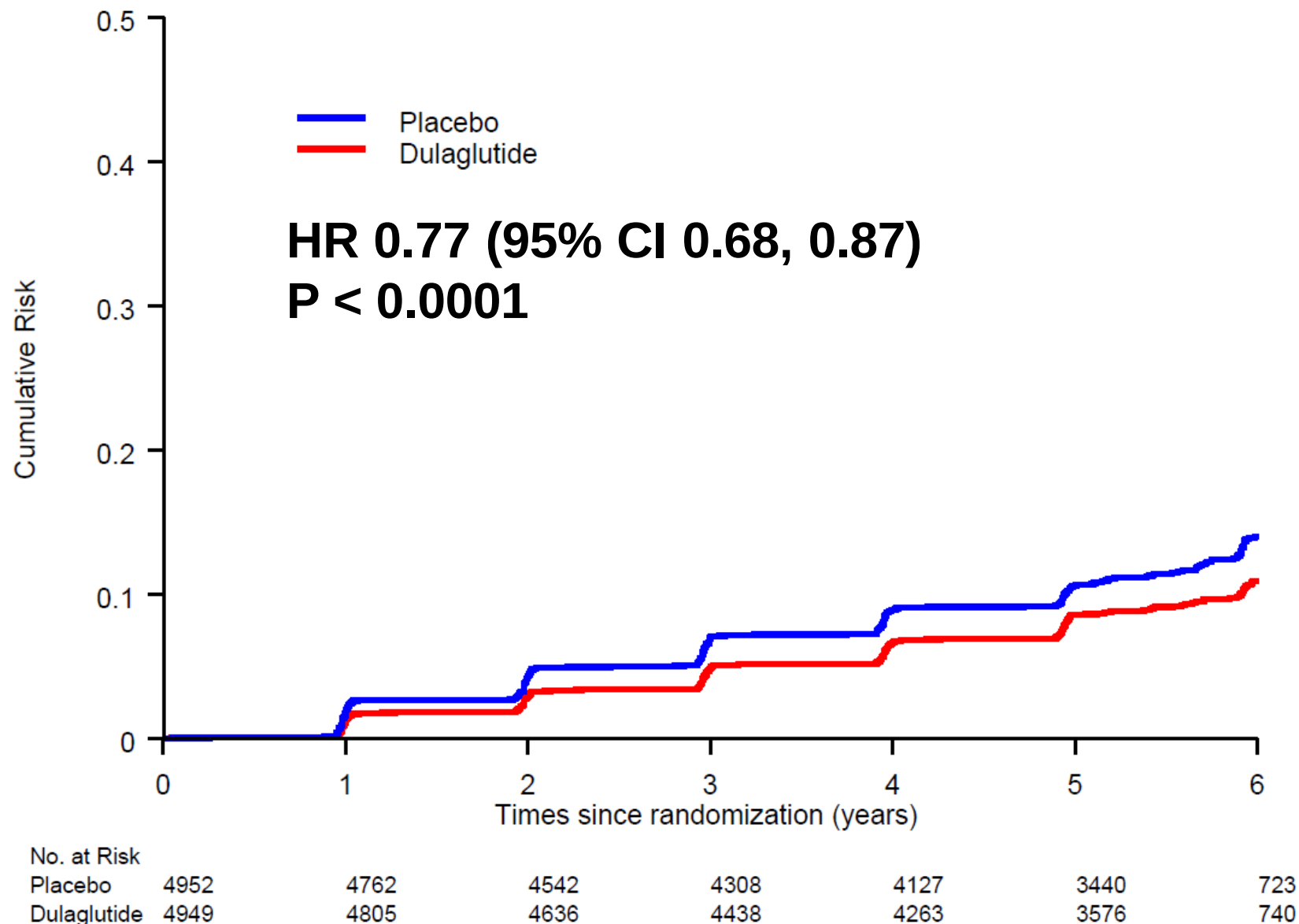
Renal Composite Outcome

New Macroalbuminuria, 30% fall in eGFR, or Renal Replacement Rx

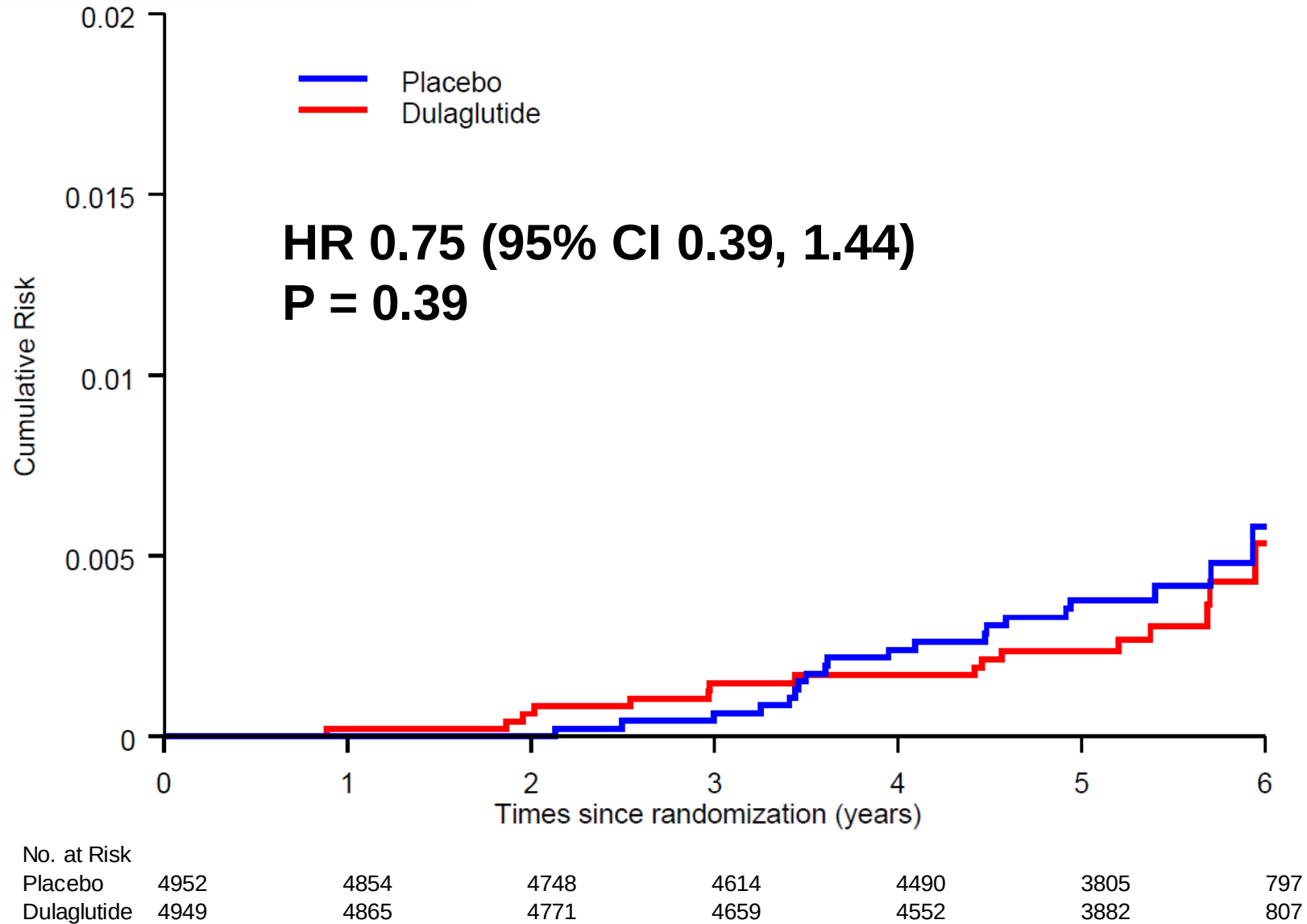


Development of New Macroalbuminuria

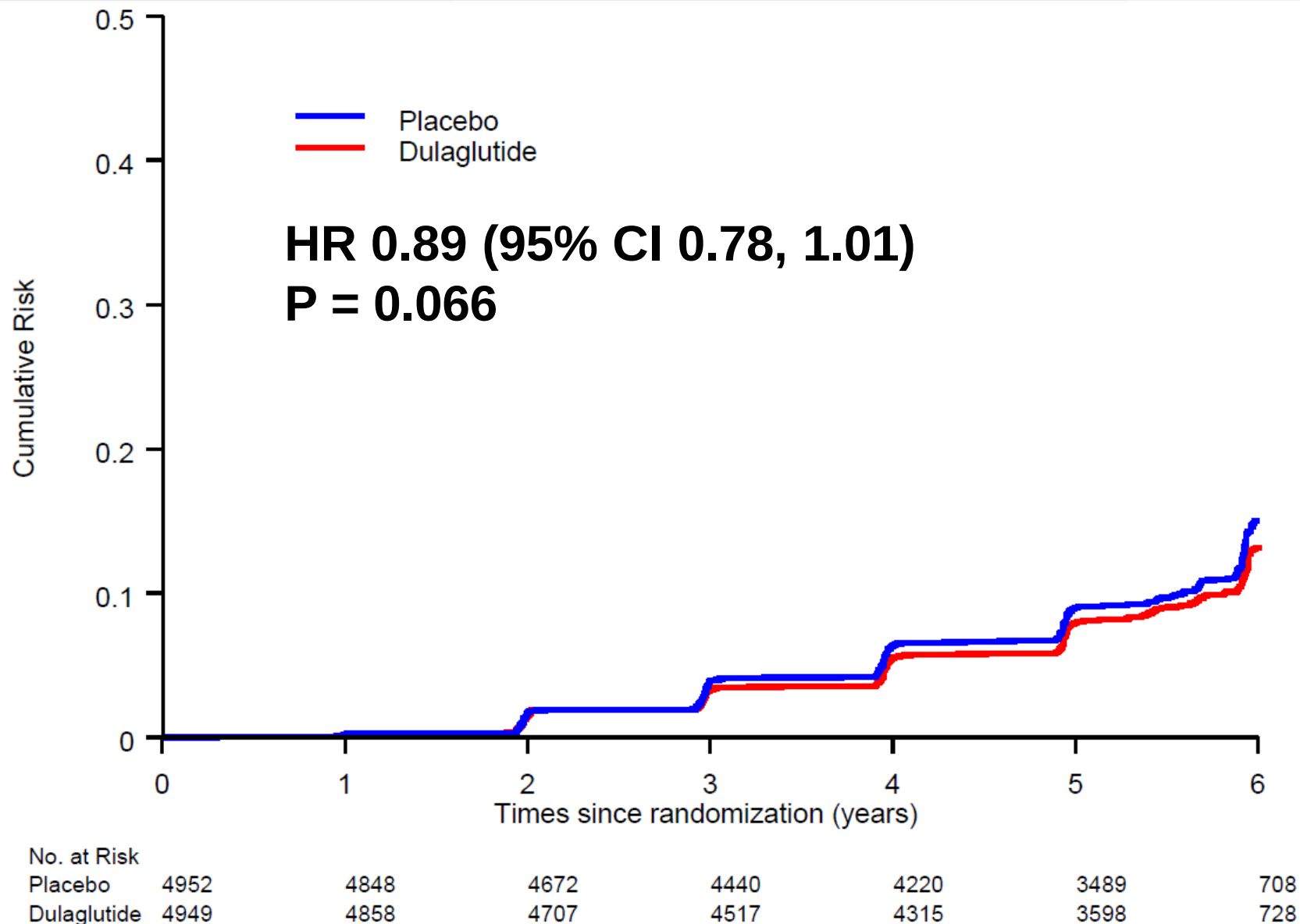
New Urine Albumin/Creatinine > 33.9 mg/mmol (300 mg/g)



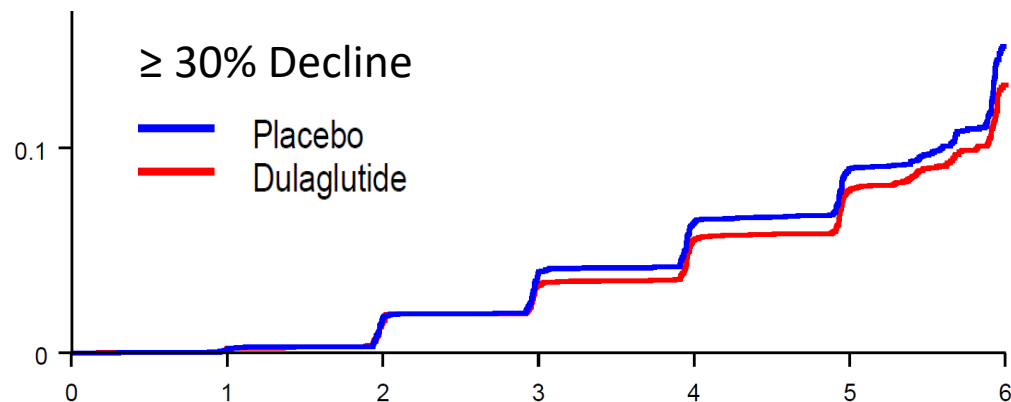
Renal Replacement Therapy



Sustained eGFR Decline $\geq 30\%$

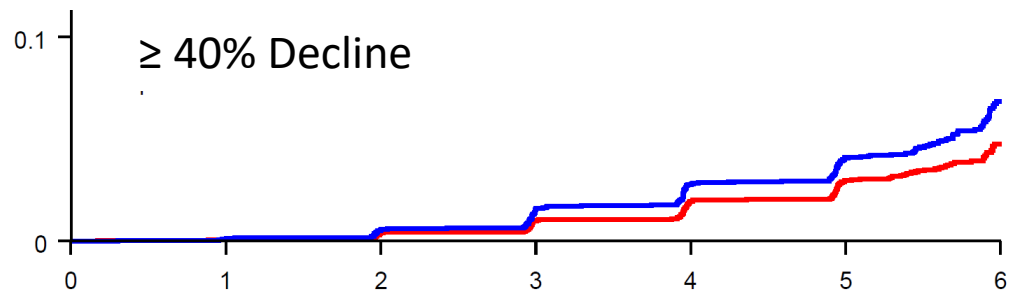


Sustained eGFR Decline $\geq 30, 40$ & 50%



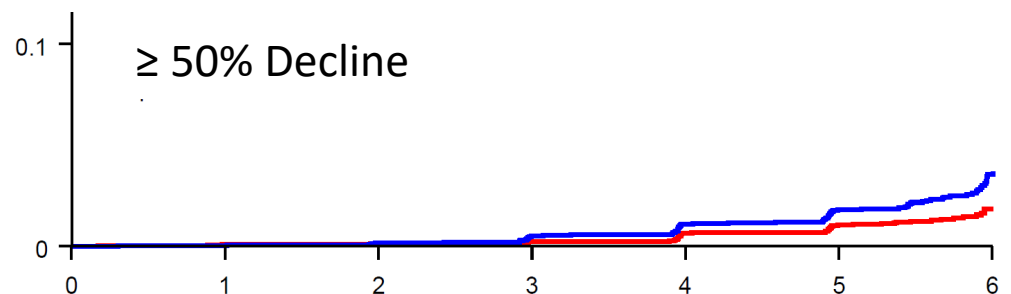
Sustained eGFR
decline $\geq 30\%$

HR 0.89 (0.78, 1.01) 0.066



Sustained eGFR
decline $\geq 40\%$

HR 0.70 (0.57, 0.85) 0.0004



Sustained eGFR
decline $\geq 50\%$

HR 0.56 (0.41, 0.76) 0.0002

Sensitivity Analyses

Dulaglutide & Renal Outcome: Subgroups

Subgroup	HR (95%CI)	P Int
Overall Effect	0.85 (0.77, 0.93)	-
eGFR < 60	0.88 (0.73, 1.05)	0.65
eGFR ≥ 60	0.83 (0.75, 0.93)	
No Albuminuria^a	0.87 (0.75, 1.01)	0.66
Albuminuria	0.84 (0.74, 0.95)	
No ACEi/ARB use	0.97 (0.77, 1.22)	0.23
ACEi/ARB use	0.83 (0.75, 0.92)	

^aACR ≥3.39 mg/mmol (30 mg/g)

Summary: Dulaglutide & Renal Outcomes

	Dulaglutide (N/100 py)	Placebo (N/100 py)	HR (95%CI)	P
Renal Composite Outcome	3.47	4.07	0.85 (0.77, 0.93)	0.0004
Components of Composite				
First Macroalbuminuria^a	1.76	2.29	0.77 (0.68, 0.87)	<0.0001
Sustained Decline in eGFR of $\geq 30\%$	1.79	2.00	0.89 (0.78, 1.01)	0.066
Chronic Renal Replacement	0.06	0.08	0.75 (0.39, 1.44)	0.39
Serious Renal Adverse Event^b	0.32	0.36	0.90 (0.67, 1.20)	0.46

^aACR > 33.9 mg/mmol (300 mg/g); ^bany reported AE linked to acute renal failure

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<i>Sensitivity Analyses</i>				
a) Sustained eGFR Decline $\geq 40\%$	0.66	0.93	0.70 (0.57, 0.85)	0.0004
Renal composite with this decline	2.36	3.10	0.76 (0.68, 0.84)	<0.0001
b) Sustained eGFR Decline $\geq 50\%$	0.24	0.42	0.56 (0.41, 0.76)	0.0002
Renal composite with this decline	1.99	2.66	0.74 (0.66, 0.84)	<0.0001

^aACR > 33.9 mg/mmol (300 mg/g); ^bany reported AE linked to acute renal failure

Adverse Events of Special Interest

	Dulaglutide N = 4949	Placebo N= 4952	P
1st Study Drug Stopping	42.3%	43.8%	0.38
Acute Pancreatitis	0.5%	0.3%	0.11
Based on Imaging & Enzymes	0.1%	0.1%	0.71
Any Cancer	7.1%	7.0%	0.98
MTC or C-Cell Hyperplasia	1	0	0.32
Thyroid Cancer	0.1%	0.1%	0.21
Pancreatic Cancer	0.4%	0.2%	0.22

Adverse Events of Special Interest

	Dulaglutide N = 4949	Placebo N= 4952	P
Serious Hepatic Event (%)	0.5	0.8	0.057
Serious Renal/Urinary Event (%)	1.7	1.9	0.46
Immune Reactions (%)	0.2	0.4	0.022
Serious GI Event*	2.4	2.4	0.87
SVT/CV Conduction Disorders (%)	4.4	3.9	0.26
Severe Hypoglycemia (%)	1.3	1.5	0.38

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SVT/CV Conduction Disorders (%)	4.4	3.9	0.26
Severe Hypoglycemia (%)	1.3	1.5	0.38
<i>* All GI adverse events</i>	<i>47.4%</i>	<i>34.1%</i>	<i><0.0001</i>

Reported Serious Adverse Events

	Dulaglutide N = 4949	Placebo N= 4952	P*
Blood/Lymphatic System Disorders	1.2%	1.0%	0.33
Cardiac Disorders	11.1%	11.3%	0.71
Congenital, Familial & Genetic Disorders	0.2%	0.1%	0.22
Ear & Labyrinth Disorders	0.2%	0.3%	0.26
Endocrine Disorders	0.5%	0.2%	0.05
Eye Disorders	0.8%	1.1%	0.17
Gastrointestinal Disorders	4.8%	4.6%	0.70
General & Administration Site Conditions	1.8%	2.2%	0.17
Hepatobiliary Disorders	2.4%	2.1%	0.45
Immune System Disorders	0.0%	0.1%	0.16
Infections & Infestations	9.8%	10.4%	0.34
Injury, Poisoning & Procedural Complications	5.3%	5.3%	0.92

*P from chi square test

Reported Serious Adverse Events

	Dulaglutide N = 4949	Placebo N= 4952	P*
Metabolism & Nutrition Disorders	3.4%	4.0	0.11
MSK & Connective Tissue Disorders	4.6%	4.4%	0.59
Neoplasms Benign, Malignant & Unspecified	6.7%	6.7%	0.97
Nervous System Disorders	4.4%	5.1%	0.13
Psychiatric Disorders	0.7%	0.9%	0.26
Renal & Urinary Disorders	3.2%	3.6%	0.24
Reproductive System & Breast Disorders	1.1%	0.8%	0.18
Respiratory, Thoracic, Mediastinal Disorders	3.0%	3.5%	0.16
Skin & Subcutaneous Tissue Disorders	0.7%	1.0%	0.06
Social Circumstances	1	1	
Vascular Disorders	2.9%	3.1%	0.60
Product Issues	0.1%	0.2%	0.11

*P from chi square test

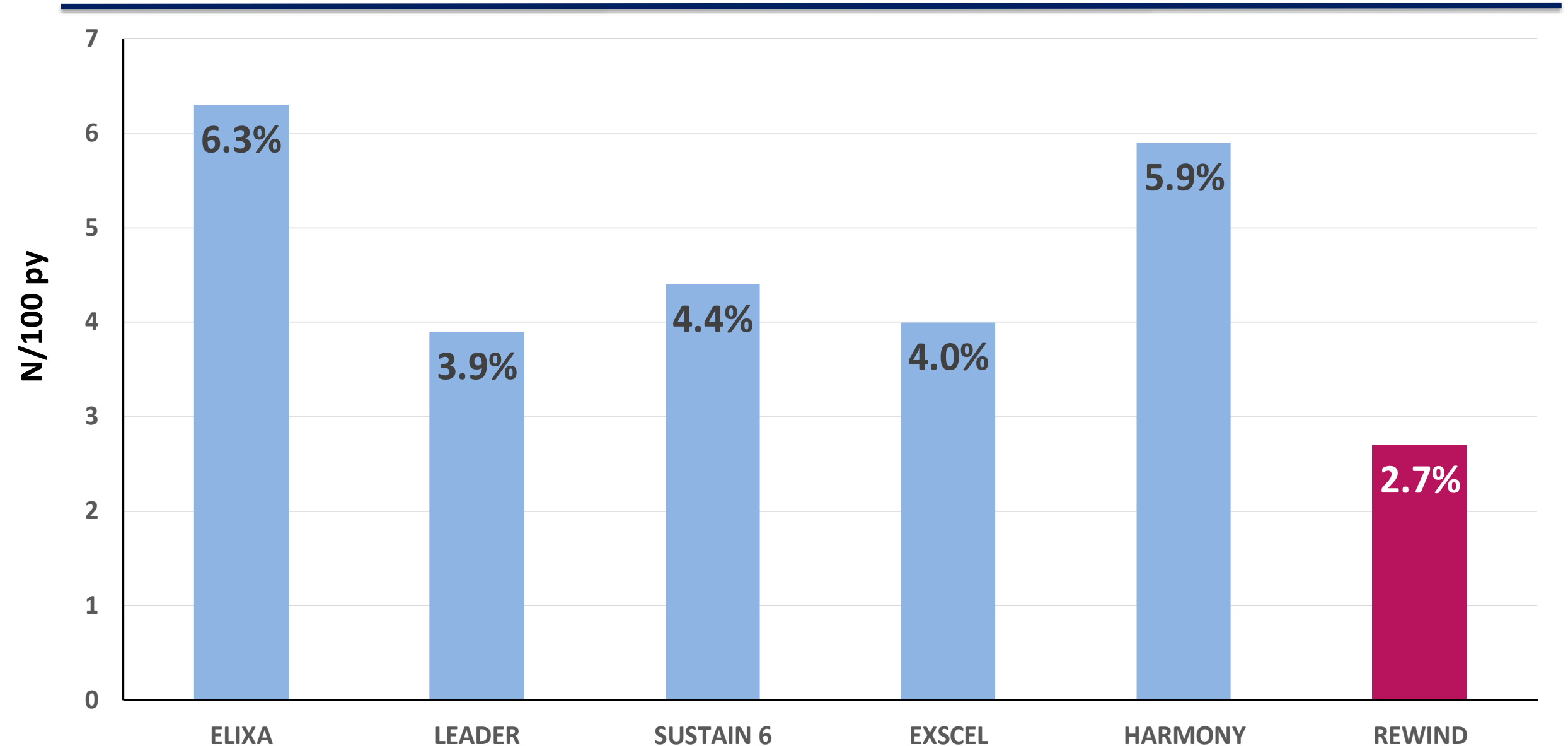
REWIND Findings in Context

	ELIXA	LEADER	SUSTAIN 6	EXSCEL	HARMONY
N	6068	9340	3297	14752	9463
Drug Tested	Lixi/d	Lira/d	Sema/wk	Exena/wk	Albig/wk
Prior CVD	100%	81%	83%	73%	100%
Mean Age	60 y	64 y	54 y	62 y	64 y
Women	30%	36%	39%	38%	31%
Median F/U	2.1 y	3.8 y	2.1 y	3.2 y	1.6 y
DM Duration	9.2 y	12.8 y	13.9 y	13.1 y	14.2 y
Baseline A1c	7.7%	8.7%	8.7%	8.1%	8.8%
Baseline eGFR	76	~75	~75	76	79
Insulin Use	39%	45%	58%	46%	59%

REWIND Findings in Context

	ELIXA	LEADER	SUSTAIN 6	EXSCEL	HARMONY	REWIND
N	6068	9340	3297	14752	9463	9901
Drug Tested	Lixi/d	Lira/d	Sema/wk	Exena/wk	Albig/wk	Dula/wk
Prior CVD	100%	81%	Participants were similar to the sorts of ambulatory patients with type 2 DM & CV risk factors who are routinely seen in clinical practice			31%
Mean Age	60 y	64 y				66 y
Women	30%	36%				46%
Median F/U	2.1 y	3.8 y				5.4 y
DM Duration	9.2 y	12.8 y				10.5 y
Baseline A1c	7.7%	8.7%				7.3%
Baseline eGFR	76	~75	~75	76	79	77
Insulin Use	39%	45%	58%	46%	59%	24%

Annual Placebo MACE Rates by Trial



Summary

- *In middle age & older men & women similar to people with type 2 DM in the general population with ...*
 - *a broad range of glycemic control &*
 - *high use of at least one CV protective drug*

... adding dulaglutide (1.5mg sc/wk) safely reduces CV outcomes for > 5 yrs
- *Similar benefits occur in:*
 - *men & women*
 - *higher & lower BMI*
 - *prior & no prior CVD*
 - *higher & lower A1c*

Summary

- *Dulaglutide therapy for a median of 5.4 years also durably reduced*
 - *HbA1c by ~0.6%,*
 - *Weight by 1.5 kg, &*
 - *Systolic BP by 1.7 mm Hg*
- *Dulaglutide was taken for 82% of follow-up time & was well-tolerated with more GI AEs (as expected)*

Conclusion

The addition of dulaglutide could be considered for both primary & secondary CV prevention in middle-aged patients with type 2 diabetes & cardiovascular risk factors

Thanks to....

9901 REWIND participants & their families

All of the REWIND investigators, coordinators, & research staff worldwide

Resources

Presentation Slides for download: [*www.phri.ca/rewind*](http://www.phri.ca/rewind)

2 Online Publications: [*www.thelancet.com*](http://www.thelancet.com)

Dulaglutide and cardiovascular outcomes in type 2 diabetes (REWIND): a double-blind, randomised placebo-controlled trial



Dulaglutide and renal outcomes in type 2 diabetes: an exploratory analysis of the REWIND randomised, placebo-controlled trial

