



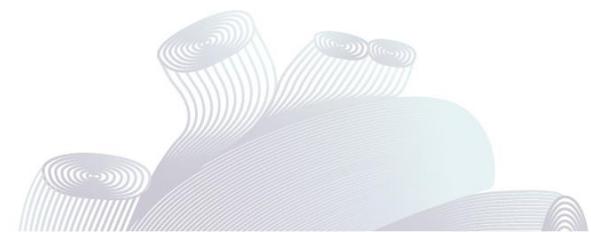
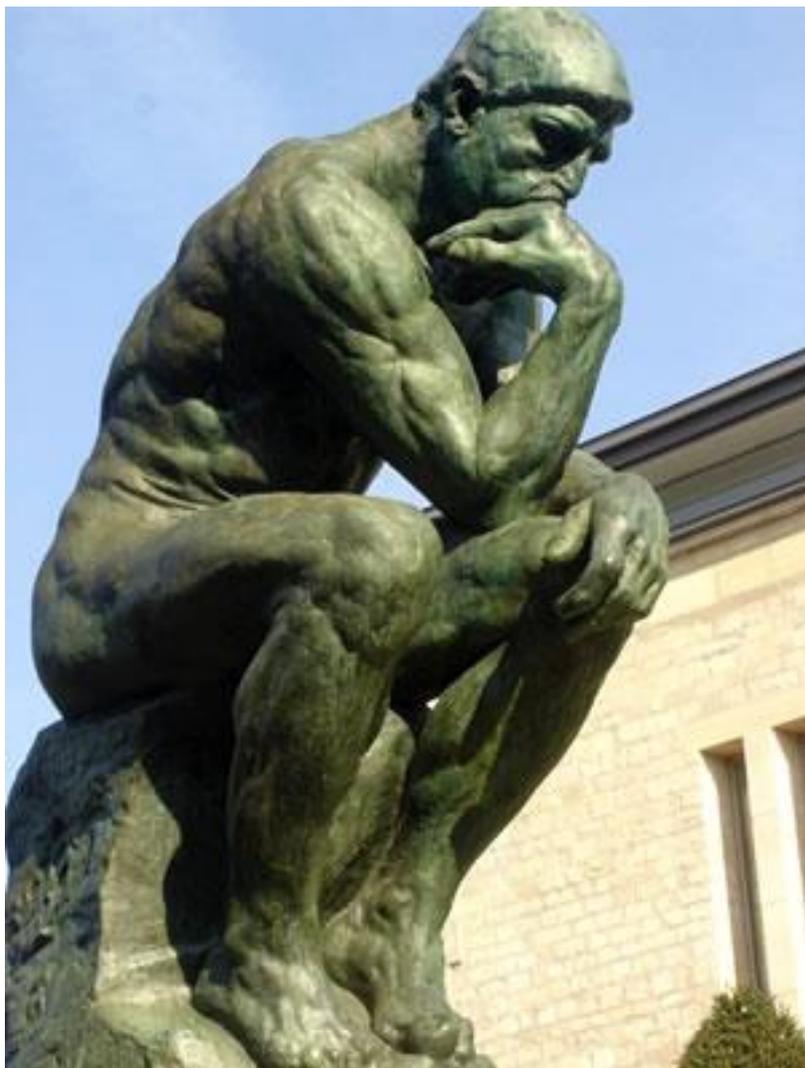
**7th Advances
in Heart
Failure 2024**

10 e 11 de Outubro

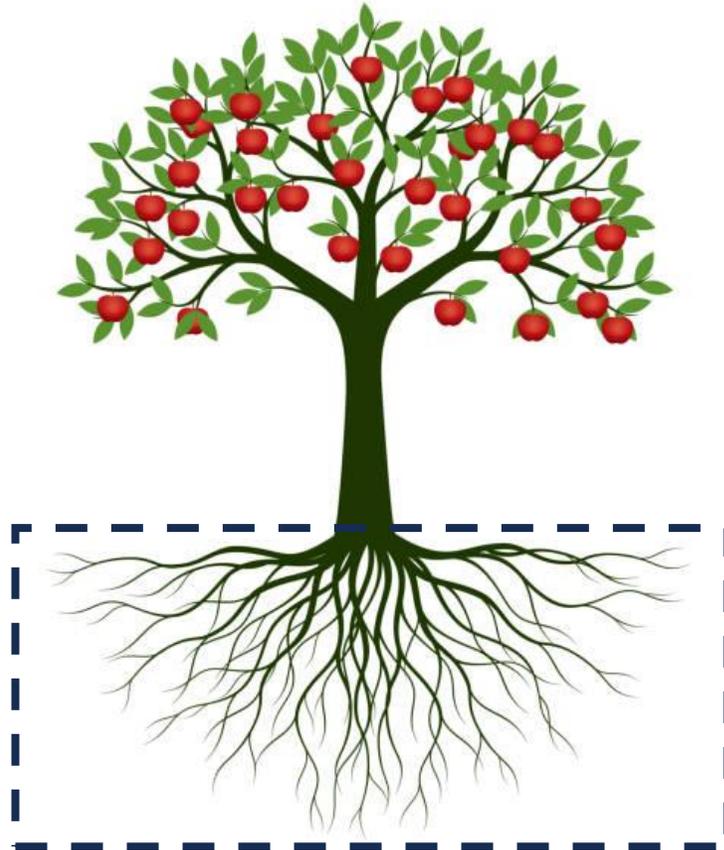
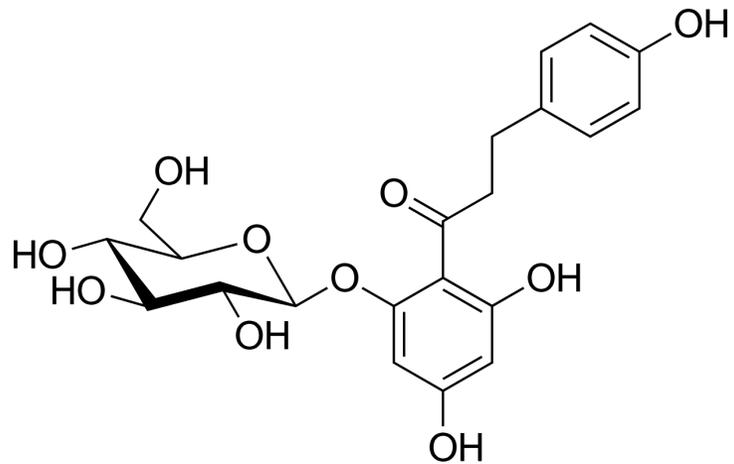
FACULDADE DE MEDICINA DA UNIVERSIDADE DO PORTO

Terapêuticas independentes da Fração de Ejeção
Inibidores do SGLT-2

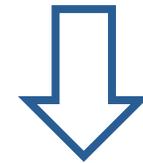
Francisco Vasques-Nóvoa



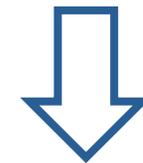
Florizina



Casca + Raiz



Φλοιός (*floiós*) + ρίζα (*riza*)



Flo + Rizina

De Koninck LG: Über das Phloridzin (Phlorrhizin) Annalen der Pharmacie. Heidelberg, **1835**, vol 15, pp 75–77.



Prof. Josef von Mering
1849-1908

Diabetes

Glicosuria

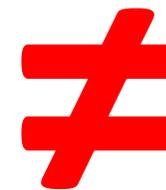
Hiperglicemia

“Phlorizin-Diabetes”

20g Florizina

Glicosuria

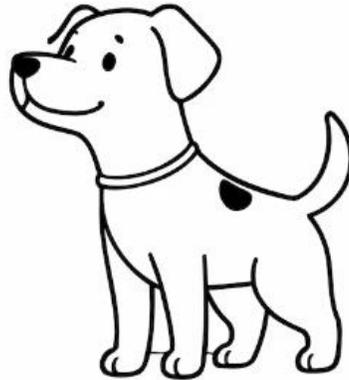
Hipoglicemia
Cetose





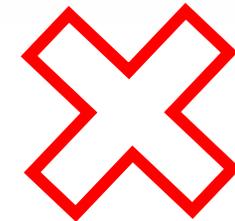
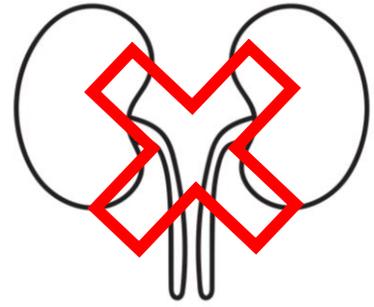
Dr. Oskar Minkowski
1858-1931

Florizina



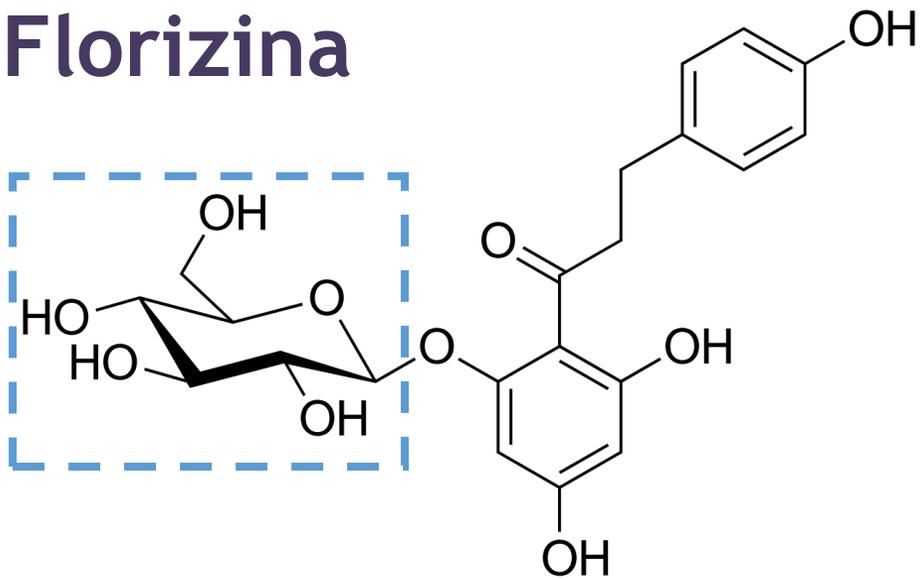
Hipoglicemia
Glicosuria

Florizina

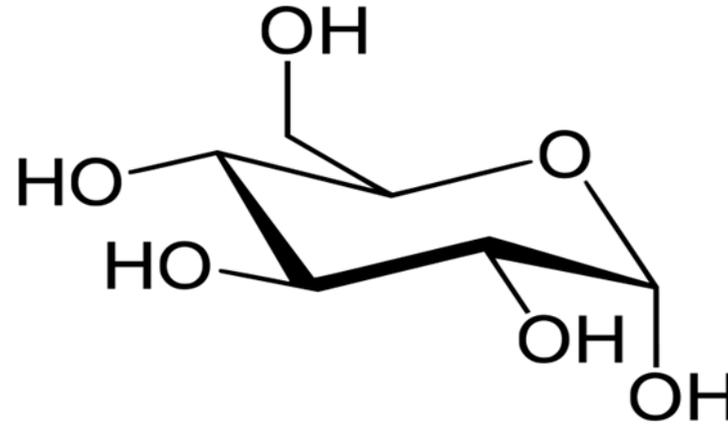


Hipoglicemia
Glicosuria

Florizina

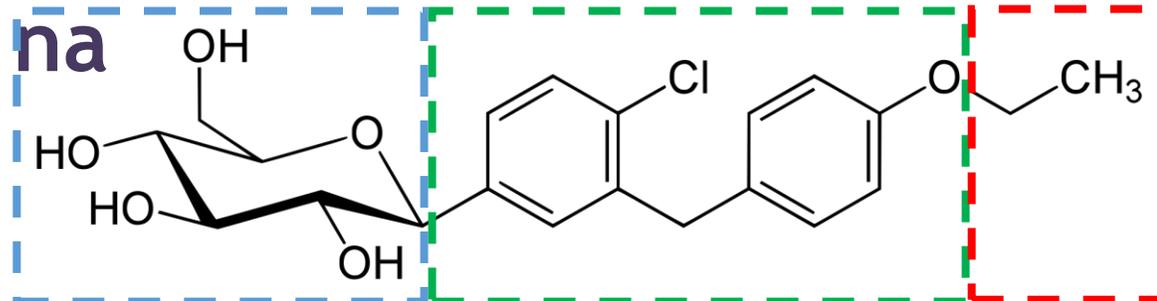


Glicose



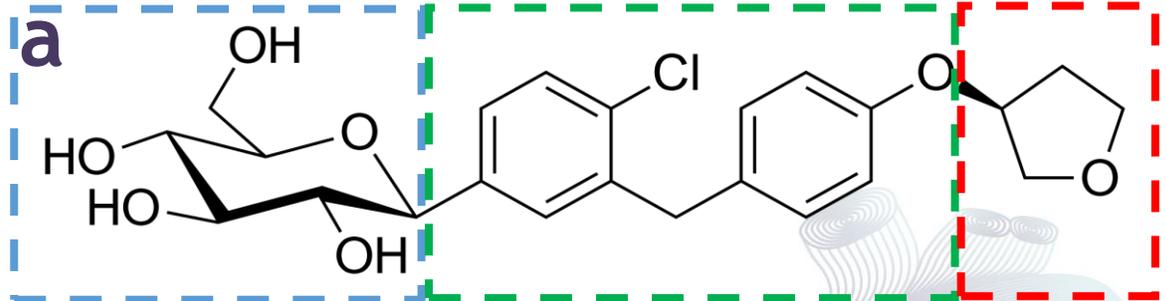
Dapagliflozi

AstraZeneca  Bristol Myers Squibb® 



Empagliflozin

Lilly  Boehringer Ingelheim 



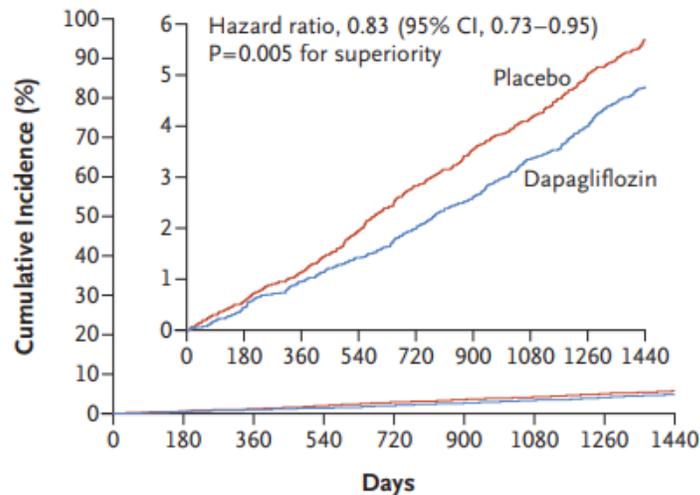
The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Dapagliflozin and Cardiovascular Outcomes in Type 2 Diabetes

S.D. Wiviott, I. Raz, M.P. Bonaca, O. Mosenzon, E.T. Kato, A. Cahn, M.G. Silverman, T.A. Zelniker, J.F. Kuder, S.A. Murphy, D.L. Bhatt, L.A. Leiter, D.K. McGuire, J.P.H. Wilding, C.T. Ruff, I.A.M. Gause-Nilsson, M. Fredriksson, P.A. Johansson, A.-M. Langkilde, and M.S. Sabatine, for the DECLARE-TIMI 58 Investigators*

A Cardiovascular Death or Hospitalization for Heart Failure



No. at Risk									
Placebo	8578	8485	8387	8259	8127	8003	7880	7367	5362
Dapagliflozin	8582	8517	8415	8322	8224	8110	7970	7497	5445

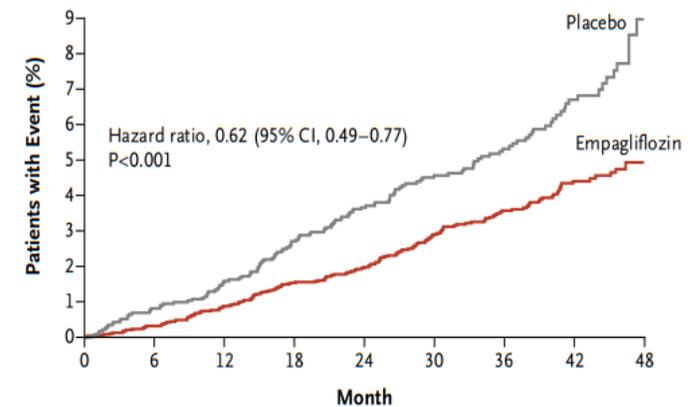
The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Empagliflozin, Cardiovascular Outcomes, and Mortality in Type 2 Diabetes

Bernard Zinman, M.D., Christoph Wanner, M.D., John M. Lachin, Sc.D., David Fitchett, M.D., Erich Bluhmki, Ph.D., Stefan Hantel, Ph.D., Michaela Mattheus, Dipl. Biomath., Theresa Devins, Dr.P.H., Odd Erik Johansen, M.D., Ph.D., Hans J. Woerle, M.D., Uli C. Broedl, M.D., and Silvio E. Inzucchi, M.D., for the EMPA-REG OUTCOME Investigators

B Death from Cardiovascular Causes



No. at Risk									
Empagliflozin	4687	4651	4608	4556	4128	3079	2617	1722	414
Placebo	2333	2303	2280	2243	2012	1503	1281	825	177

The NEW ENGLAND JOURNAL of MEDICINE

ESTABLISHED IN 1812

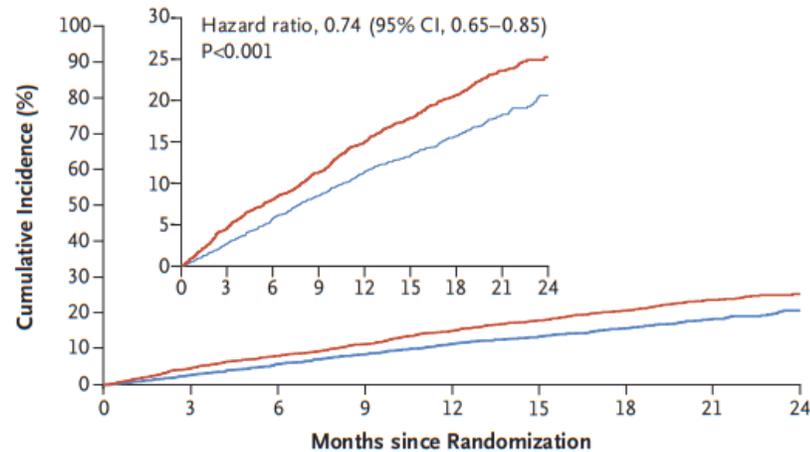
NOVEMBER 21, 2019

VOL. 381 NO. 21

Dapagliflozin in Patients with Heart Failure and Reduced Ejection Fraction

J.J.V. McMurray, S.D. Solomon, S.E. Inzucchi, L. Køber, M.N. Kosiborod, F.A. Martinez, P. Ponikowski, M.S. Sabatine, I.S. Anand, J. Böhlhávek, M. Böhm, C.-E. Chiang, V.K. Chopra, R.A. de Boer, A.S. Desai, M. Diez, J. Drozd, A. Dukát, J. Ge, J.G. Howlett, T. Katova, M. Kitakaze, C.E.A. Ljungman, B. Merkely, J.C. Nicolau, E. O'Meara, M.C. Petrie, P.N. Vinh, M. Schou, S. Tereshchenko, S. Verma, C. Held, D.L. DeMets, K.F. Docherty, P.S. Jhund, O. Bengtsson, M. Sjöstrand, and A.-M. Langkilde, for the DAPA-HF Trial Committees and Investigators*

A Primary Outcome



No. at Risk

	0	3	6	9	12	15	18	21	24
Placebo	2371	2258	2163	2075	1917	1478	1096	593	210
Dapagliflozin	2373	2305	2221	2147	2002	1560	1146	612	210

The NEW ENGLAND JOURNAL of MEDICINE

ESTABLISHED IN 1812

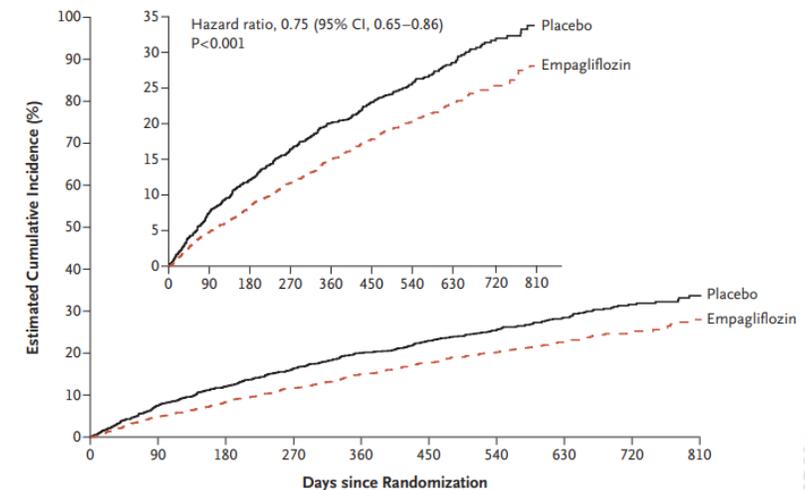
OCTOBER 8, 2020

VOL. 383 NO. 15

Cardiovascular and Renal Outcomes with Empagliflozin in Heart Failure

M. Packer, S.D. Anker, J. Butler, G. Filippatos, S.J. Pocock, P. Carson, J. Januzzi, S. Verma, H. Tsutsui, M. Brueckmann, W. Jamal, K. Kimura, J. Schnee, C. Zeller, D. Cotton, E. Bocchi, M. Böhm, D.-J. Choi, V. Chopra, E. Chuquiure, N. Giannetti, S. Janssens, J. Zhang, J.R. Gonzalez Juanatey, S. Kaul, H.-P. Brunner-La Rocca, B. Merkely, S.J. Nicholls, S. Perrone, I. Pina, P. Ponikowski, N. Sattar, M. Senni, M.-F. Seronde, J. Spinar, I. Squire, S. Taddei, C. Wanner, and F. Zannad, for the EMPEROR-Reduced Trial Investigators*

A Primary Outcome



No. at Risk

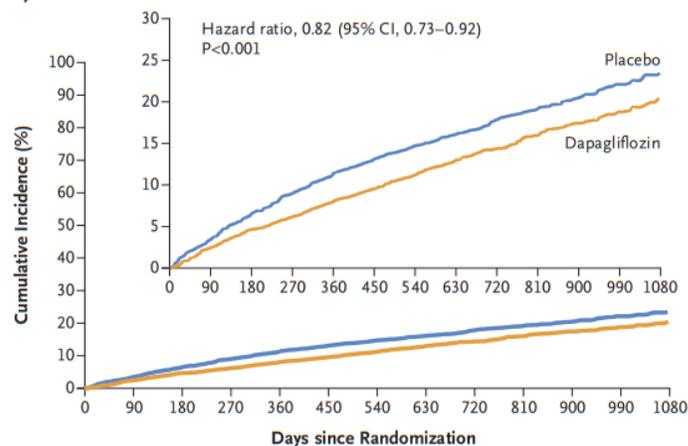
	0	90	180	270	360	450	540	630	720	810
Placebo	1867	1715	1612	1345	1108	854	611	410	224	109
Empagliflozin	1863	1763	1677	1424	1172	909	645	423	231	101

ORIGINAL ARTICLE

Dapagliflozin in Heart Failure with Mildly Reduced or Preserved Ejection Fraction

S.D. Solomon, J.J.V. McMurray, B. Claggett, R.A. de Boer, D. DeMets, A.F. Hernandez, S.E. Inzucchi, M.N. Kosiborod, C.S.P. Lam, F. Martinez, S.J. Shah, A.S. Desai, P.S. Jhund, J. Belohlavek, C.-E. Chiang, C.J.W. Borleffs, J. Comin-Colet, D. Dobreanu, J. Drozd, J.C. Fang, M.A. Alcocer-Gamba, W. Al Habeeb, Y. Han, J.W. Cabrera Honorio, S.P. Janssens, T. Katova, M. Kitakaze, B. Merkely, E. O'Meara, J.F.K. Saraiva, S.N. Tereshchenko, J. Thierer, M. Vaduganathan, O. Vardeny, S. Verma, V.N. Pham, U. Wilderäng, N. Zaozerska, E. Bachus, D. Lindholm, M. Petersson, and A.M. Langkilde, for the DELIVER Trial Committees and Investigators*

A Primary Outcome



No. at Risk		0	90	180	270	360	450	540	630	720	810	900	990	1080
Placebo		3132	3007	2896	2799	2710	2608	2518	2080	1923	1554	1140	772	383
Dapagliflozin		3131	3040	2949	2885	2807	2716	2401	2147	1982	1603	1181	801	389

The NEW ENGLAND JOURNAL of MEDICINE

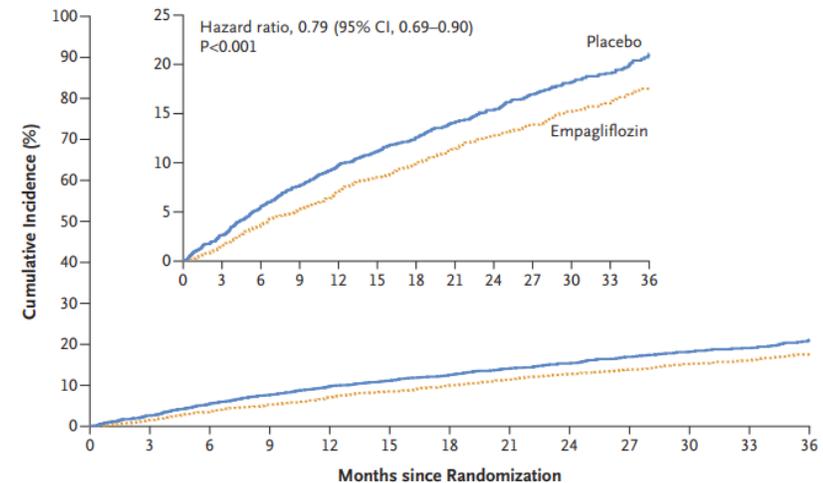
ESTABLISHED IN 1812

OCTOBER 14, 2021

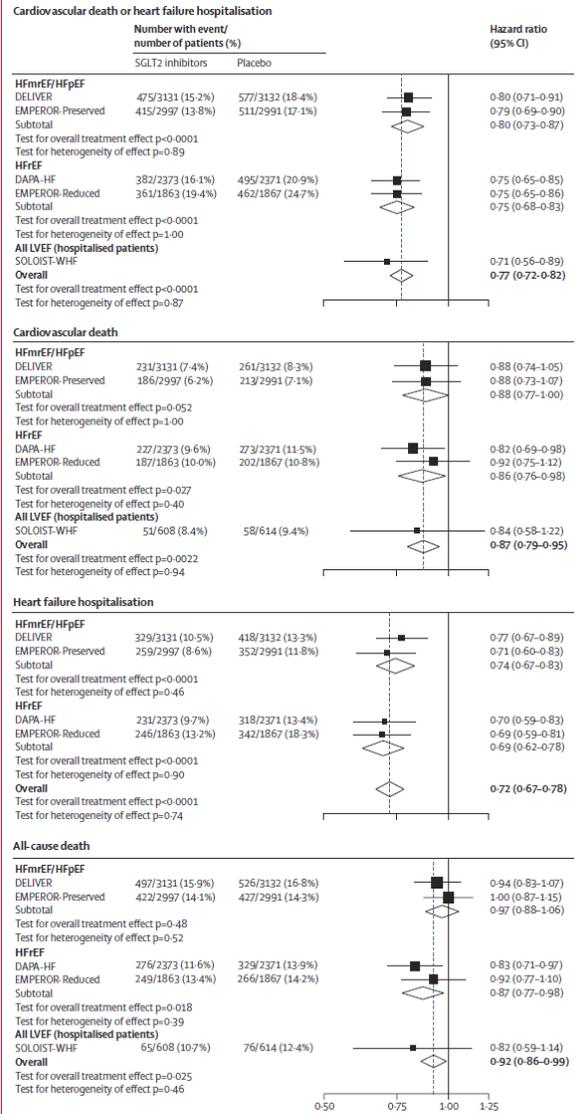
VOL. 385 NO. 16

Empagliflozin in Heart Failure with a Preserved Ejection Fraction

S.D. Anker, J. Butler, G. Filippatos, J.P. Ferreira, E. Bocchi, M. Böhm, H.-P. Brunner-La Rocca, D.-J. Choi, V. Chopra, E. Chuquiure-Valenzuela, N. Giannetti, J.E. Gomez-Mesa, S. Janssens, J.L. Januzzi, J.R. Gonzalez-Juanatey, B. Merkely, S.J. Nicholls, S.V. Perrone, I.L. Piña, P. Ponikowski, M. Senni, D. Sim, J. Spinar, I. Squire, S. Taddei, H. Tsutsui, S. Verma, D. Vinereanu, J. Zhang, P. Carson, C.S.P. Lam, N. Marx, C. Zeller, N. Sattar, W. Jamal, S. Schnaidt, J.M. Schnee, M. Brueckmann, S.J. Pocock, F. Zannad, and M. Packer, for the EMPEROR-Preserved Trial Investigators*

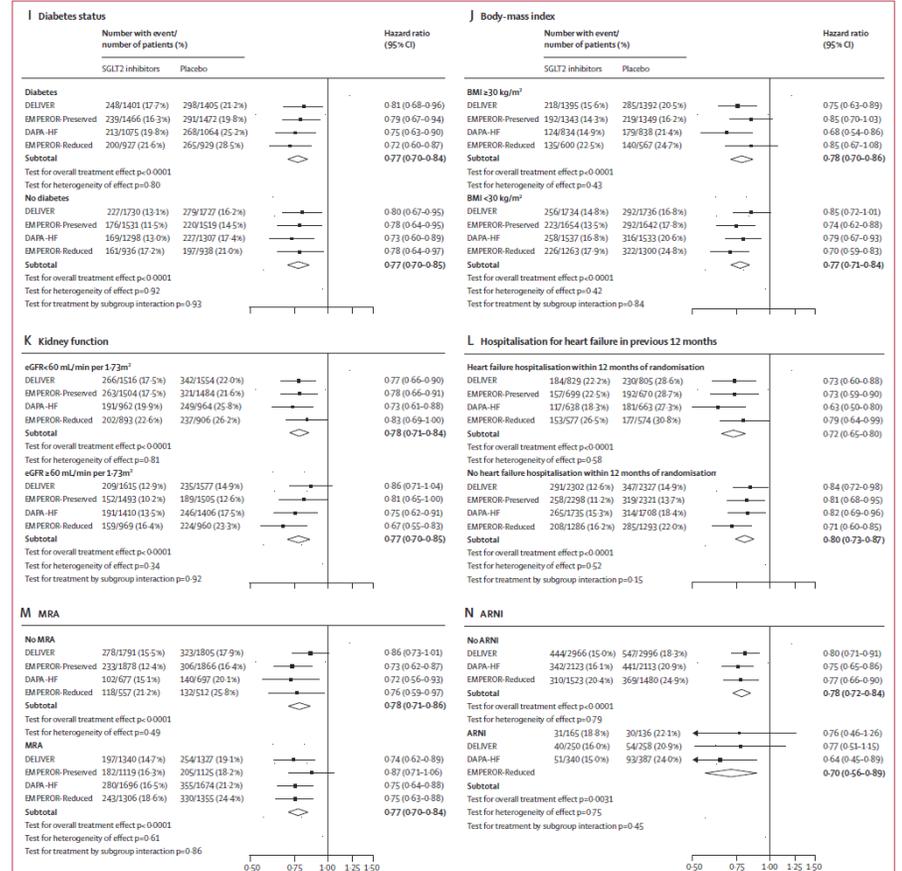
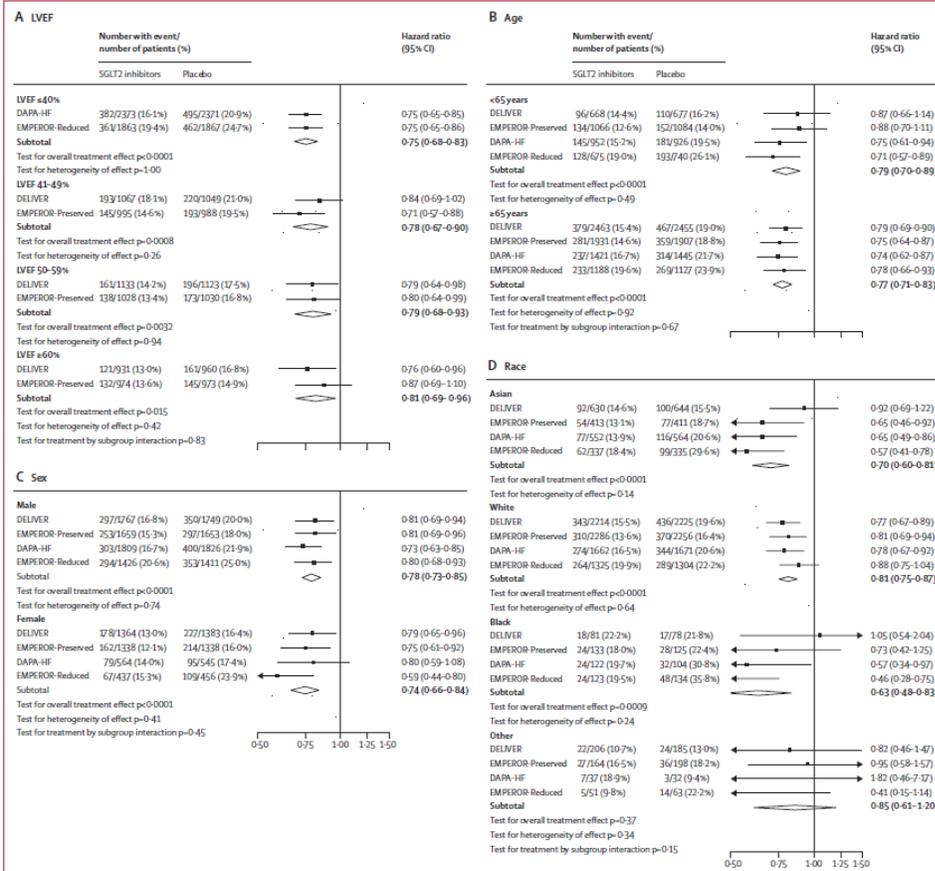


No. at Risk		0	3	6	9	12	15	18	21	24	27	30	33	36
Placebo		2991	2888	2786	2706	2627	2424	2066	1821	1534	1278	961	681	400
Empagliflozin		2997	2928	2843	2780	2708	2491	2134	1858	1578	1332	1005	709	402



SGLT2 inhibitors in patients with heart failure: a comprehensive meta-analysis of five randomised controlled trials

Muthiah Vaduganathan*, Kieran F Docherty*, Brian L Claggett, Pardeep S Jhund, Rudolf A de Boer, Adrian F Hernandez, Silvio E Inzucchi, Mikhail N Kosiborod, Carolyn S P Lam, Felipe Martinez, Sanjiv J Shah, Akshay S Desai, John V McMurray†, Scott D Solomon†

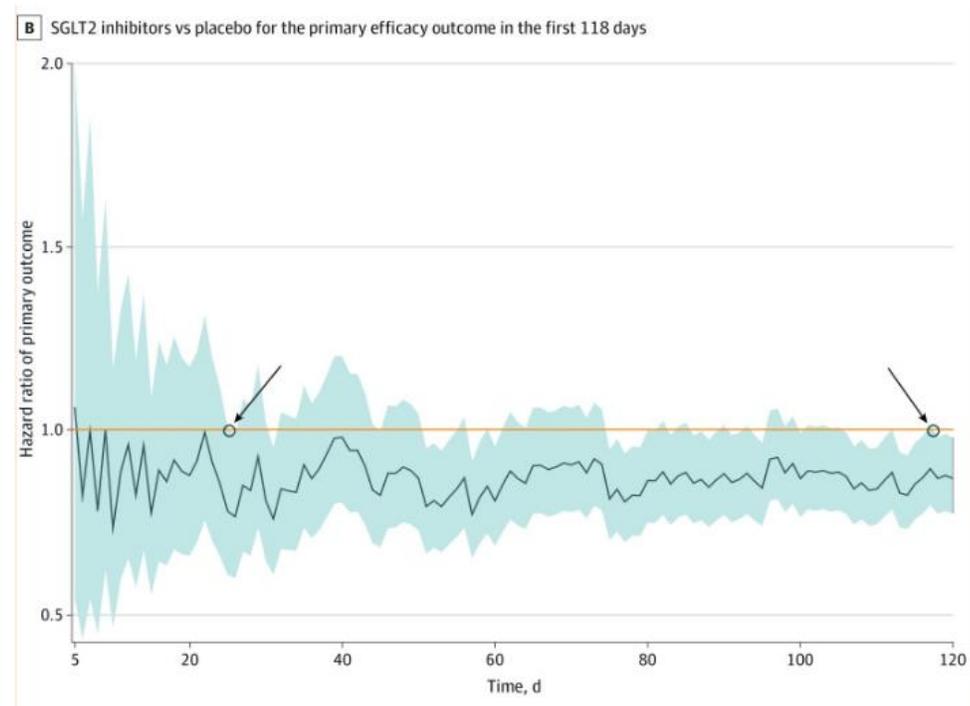
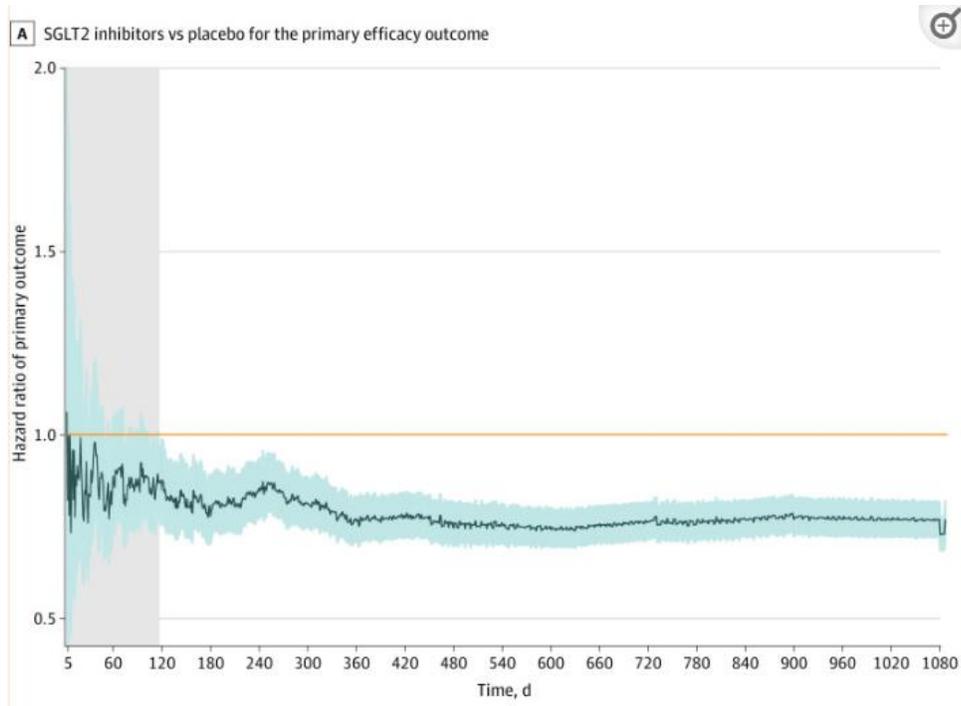




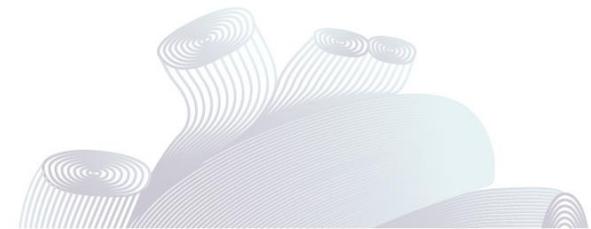
Original Investigation | Pharmacy and Clinical Pharmacology

Time to Benefit of Sodium-Glucose Cotransporter-2 Inhibitors Among Patients With Heart Failure

KangYu Chen, PhD; Zhiqiang Nie, PhD; Rui Shi, PhD; Dahai Yu, PhD; Qi Wang, PhD; Fang Shao, PhD; Guohong Wu, Msc; Zhenqiang Wu, PhD; Tao Chen, PhD; Chao Li, PhD



**Mecanismo
de
ação?**



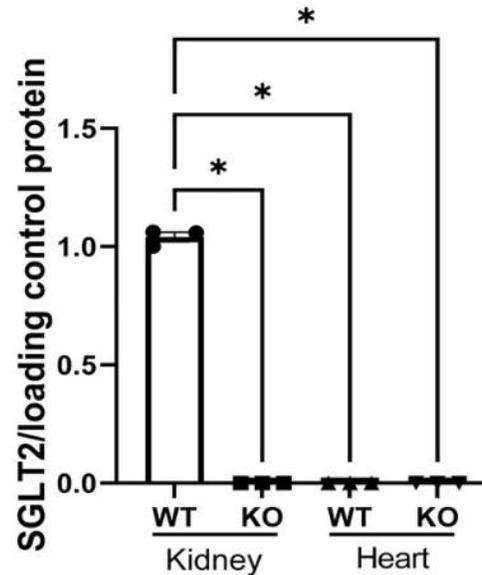
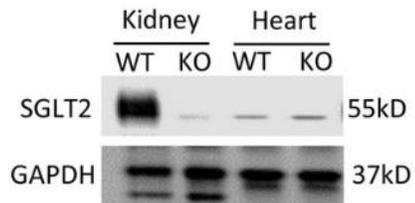


RESEARCH LETTER

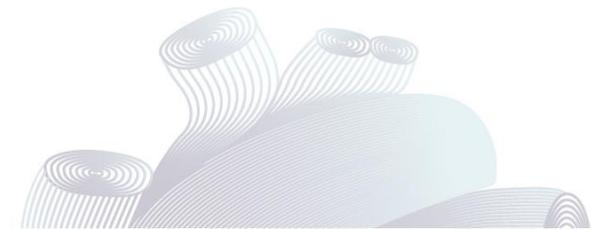
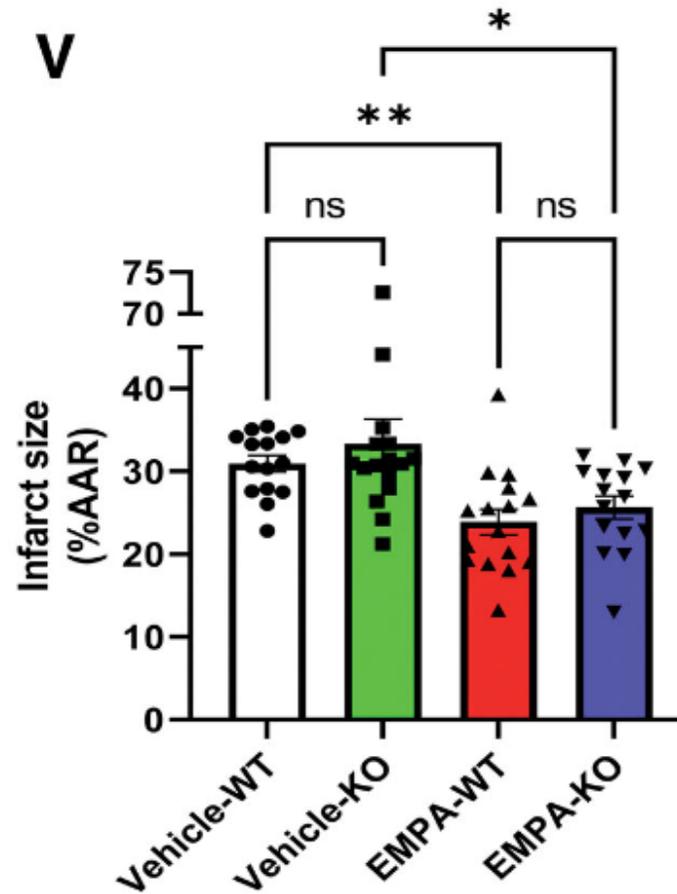
Sodium Glucose Cotransporter-2 Inhibitor Empagliflozin Reduces Infarct Size Independently of Sodium Glucose Cotransporter-2

Sha Chen, MD^{*}, Qian Wang, MD^{*}, Andriana Christodoulou, BSc^{*}, Nikolaos Mylonas, BSc, Diane Bakker, BSc, Rianne Nederlof, PhD, Markus W. Hollmann, MD, PhD , Nina C. Weber, PhD , Ruben Coronel, MD, PhD, Vincent Wakker, BSc , Vincent M. Christoffels, PhD , Ioanna Andreadou, PhD[†], and Coert J. Zuurbier, PhD [†]

C



V



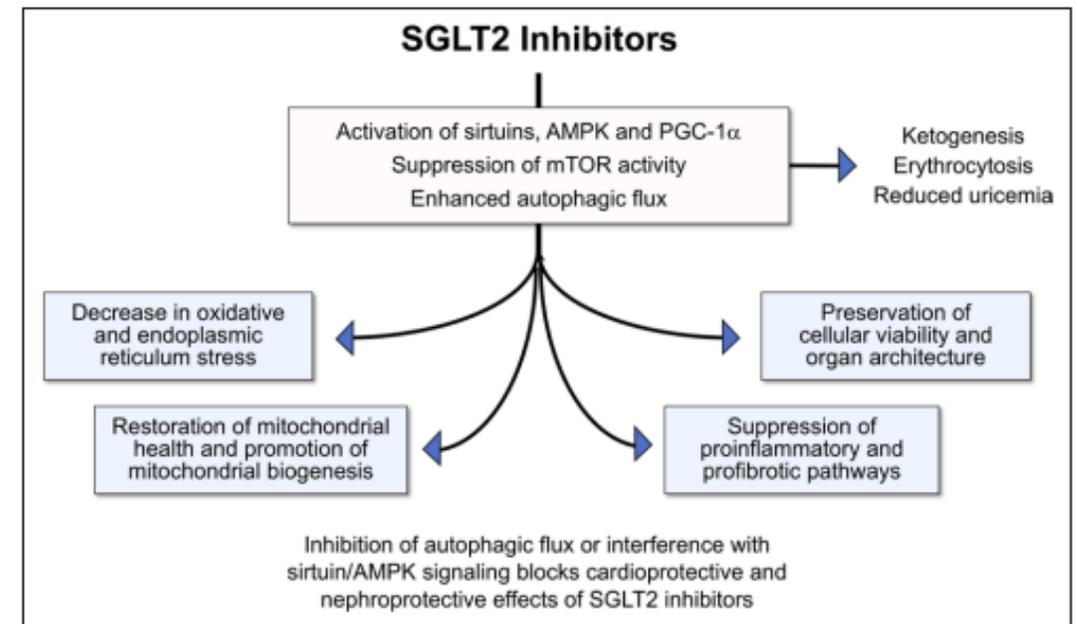
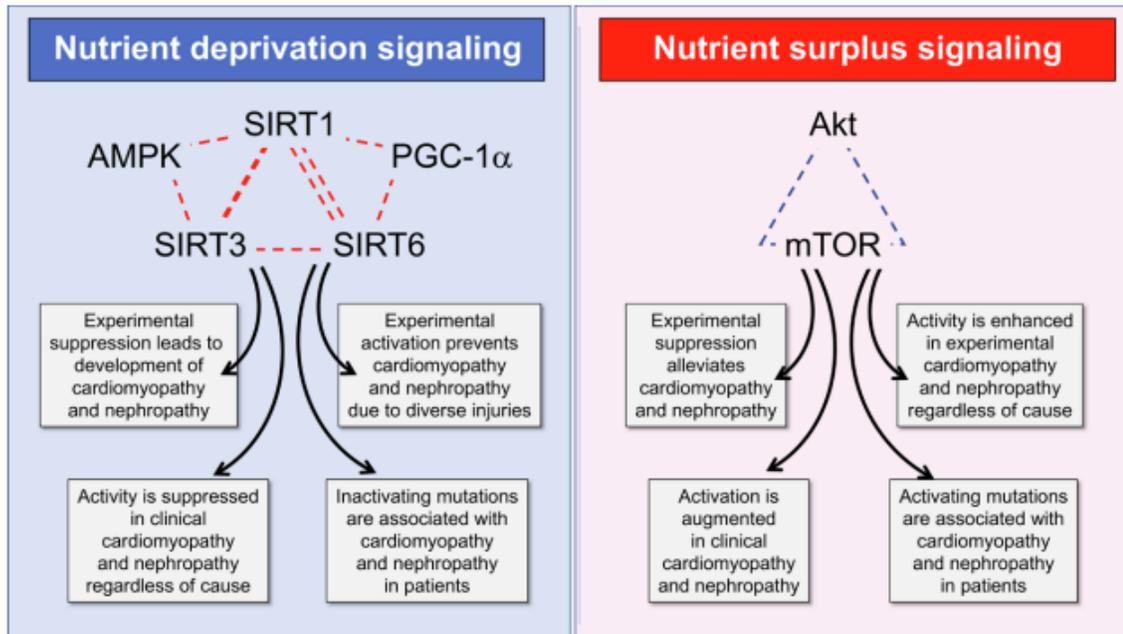
Circulation

FRONTIERS



Critical Reanalysis of the Mechanisms Underlying the Cardiorenal Benefits of SGLT2 Inhibitors and Reaffirmation of the Nutrient Deprivation Signaling/Autophagy Hypothesis

Milton Packer, MD



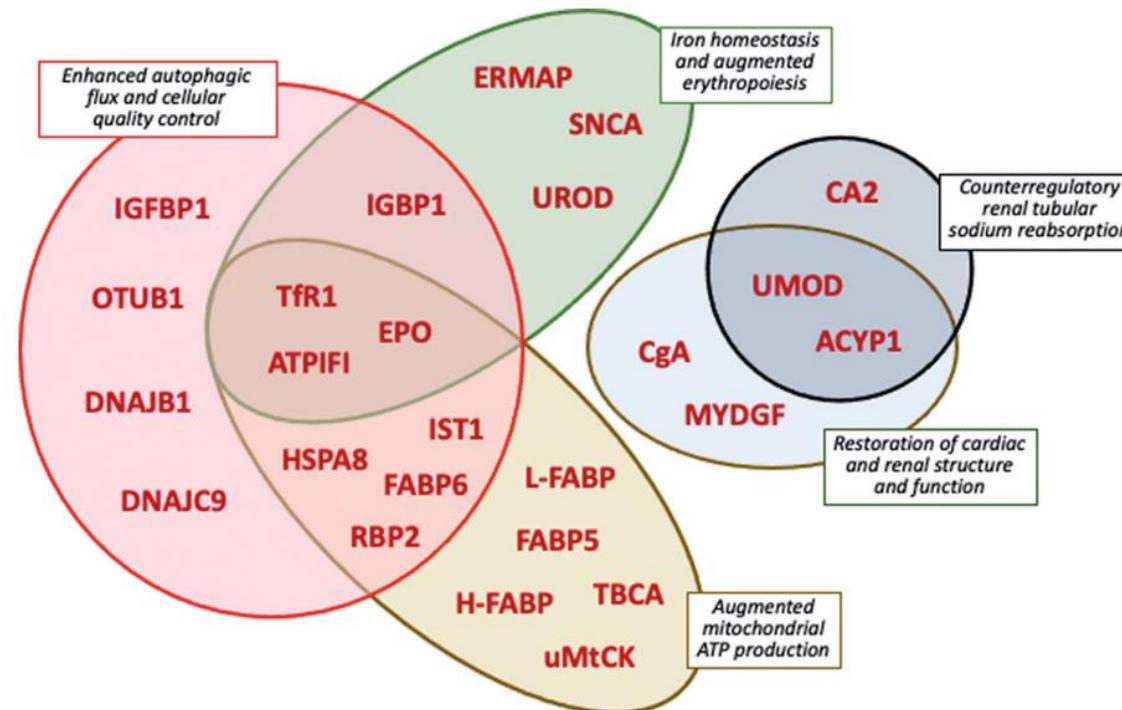
Effect of empagliflozin on circulating proteomics in heart failure: mechanistic insights into the EMPEROR programme

Faiez Zannad ^{1,*†}, João Pedro Ferreira ^{1,2,3,*†}, Javed Butler ^{4,5}, Gerasimos Filippatos ⁶, James L. Januzzi ^{7,8}, Mikhail Sumin ⁹, Matthias Zwick ¹⁰, Maral Saadati ¹¹, Stuart J. Pocock ¹², Naveed Sattar ¹³, Stefan D. Anker ^{14,15}, and Milton Packer ^{16,17}

Reaffirmation of Mechanistic Proteomic Signatures Accompanying SGLT2 Inhibition in Patients With Heart Failure

A Validation Cohort of the EMPEROR Program

Milton Packer, MD,^{a,b} João Pedro Ferreira, MD, PhD,^{c,d} Javed Butler, MD, MPH,^{d,e} Gerasimos Filippatos, MD, PhD,^f James L. Januzzi, Jr, MD,^{g,h} Sandra González Maldonado, PhD,^h Marina Panova-Noeva, MD, PhD,^{i,j} Stuart J. Pocock, PhD,^k Jürgen H. Prochaska, MD,^{l,m} Maral Saadati, PhD,ⁿ Naveed Sattar, MD, PhD,^o Mikhail Sumin, MD, PhD,^l Stefan D. Anker, MD,^p Faiez Zannad, MD, PhD^{q,r}



The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Dapagliflozin in Patients with Chronic Kidney Disease

Hiddo J.L. Heerspink, Ph.D., Bergur V. Stefánsson, M.D., Ricardo Correa-Rotter, M.D., Glenn M. Chertow, M.D., Tom Greene, Ph.D., Fan-Fan Hou, M.D., Johannes F.E. Mann, M.D., John J.V. McMurray, M.D., Magnus Lindberg, M.Sc., Peter Rossing, M.D., C. David Sjöström, M.D., Roberto D. Toto, M.D., Anna-Maria Langkilde, M.D., and David C. Wheeler, M.D., for the DAPA-CKD Trial Committees and Investigators*

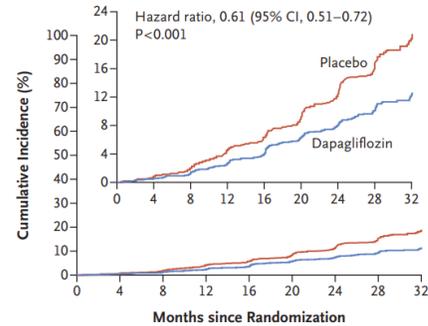
The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

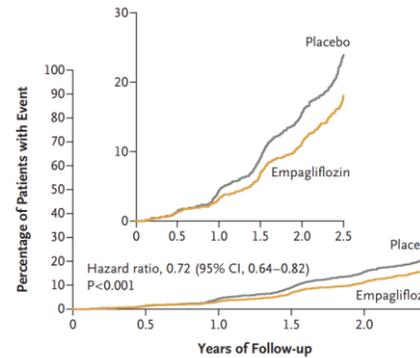
Empagliflozin in Patients with Chronic Kidney Disease

The EMPA-KIDNEY Collaborative Group*

A Primary Composite Outcome



No. at Risk	0	4	8	12	16	20	24	28	32
Placebo	2152	1993	1936	1858	1791	1664	1232	774	270
Dapagliflozin	2152	2001	1955	1898	1841	1701	1288	831	309



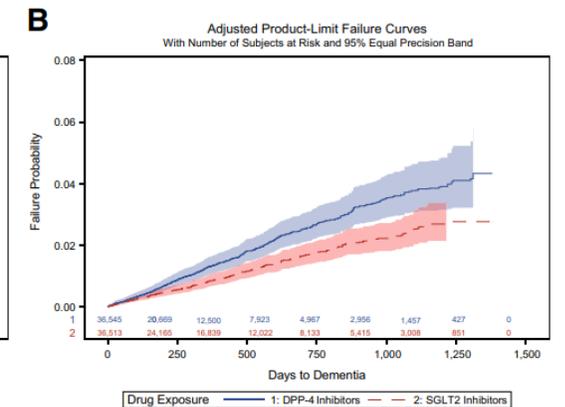
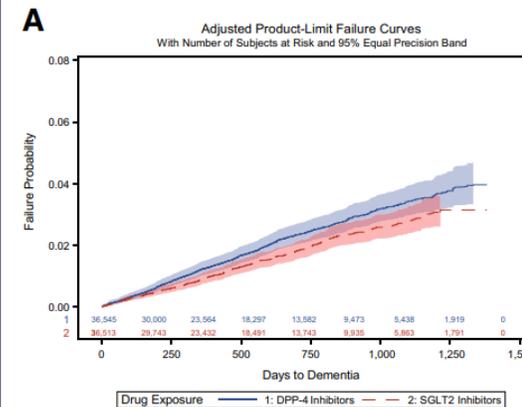
n.o. at Risk	0	0.5	1.0	1.5	2.0	2.5
Placebo	3305	3250	3129	2243	1496	59
Empagliflozin	3304	3252	3163	2275	1538	62



Association of Sodium–Glucose Cotransporter 2 Inhibitors With Time to Dementia: A Population-Based Cohort Study

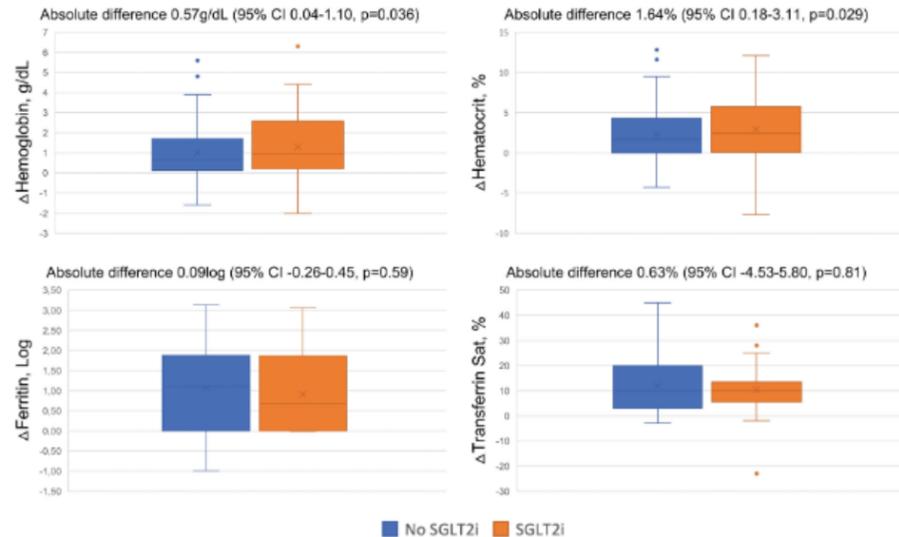
Diabetes Care 2023;46:297–304 | <https://doi.org/10.2337/dc22-1705>

Che-Yuan Wu,^{1,2} Carina Iskander,³ Christa Wang,³ Lisa Y. Xiong,^{1,2} Baiju R. Shah,^{3,4} Jodi D. Edwards,^{5,6,7} Moira K. Kapral,^{3,8,9} Nathan Herrmann,^{10,11} Krista L. Lanctôt,^{1,2,10,11,12,13} Mario Masellis,^{2,14} Richard H. Swartz,^{2,3,14} Hugo Cogo-Moreira,^{2,15} Bradley J. MacIntosh,^{2,16,17} Jennifer S. Rabin,^{2,14,18,19} Sandra E. Black,^{2,13,14} Refik Saskin,³ and Walter Swardfager^{1,2,12}



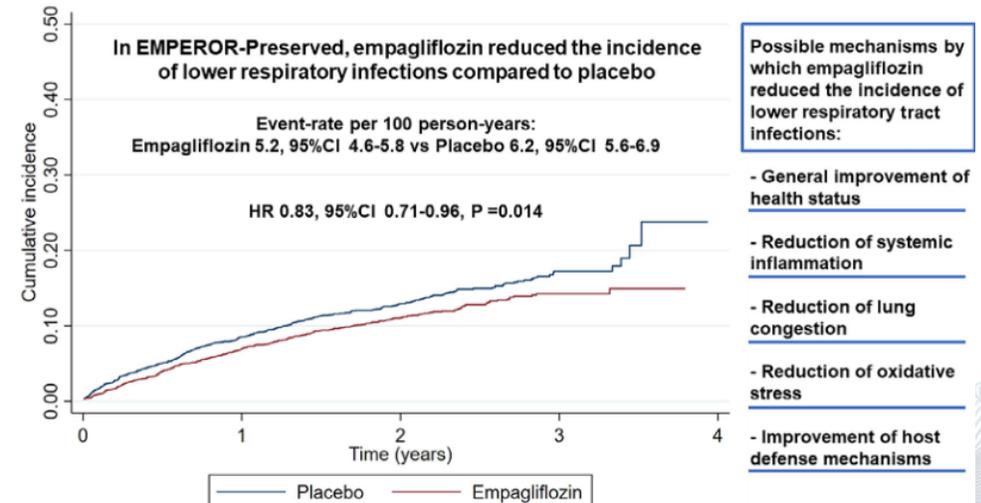
Erythropoietic response after intravenous iron in patients with heart failure and reduced ejection fraction with and without background treatment with sodium–glucose cotransporter 2 inhibitors

Pedro Marques^{1,2,3*}, Paula Matias¹, Milton Packer^{4,5}, Joana T. Vieira¹, Francisco Vasques-Nóvoa^{1,2}, Abhinav Sharma⁶, Thomas A. Mavrakanas³, Fernando Friões^{1,2,7}, and João Pedro Ferreira^{2,8*}



Empagliflozin and risk of lower respiratory tract infection in heart failure with mildly reduced and preserved ejection fraction: An EMPEROR-Preserved analysis

João Pedro Ferreira^{1,2,3*}, Faiez Zannad³, Milton Packer^{4,5}, Gerasimos Filippatos⁶, Stuart J. Pocock⁷, Francisco Vasques-Nóvoa^{1,8}, Michael Böhm⁹, Javed Butler^{10,11}, and Stefan Anker^{12,13}



Conclusões

- Fármacos seguros e com evidência robusta de benefício prognóstico independentemente da categoria de FE, subgrupo clínico ou terapêutica de *background*
- Mecanismos de ação provavelmente relacionados com a ativação de vias de sinalização associadas à restrição calórica e indução do fluxo autofágico (efeito sistêmico)