



In the treatment of patients with type 2 diabetes and established CV disease receiving standard of care,<sup>1,2,5</sup> **CV death can strike at any time**

# BATTLE CV DEATH NOW MORE THAN EVER<sup>5</sup>



**Jardiance**<sup>®</sup>  
(empagliflozin)



**JARDIANCE demonstrated 38%  
RRR in CV death<sup>1,2</sup>**

Established HbA1c efficacy<sup>2</sup>

Demonstrated safety profile<sup>1,2</sup>

Convenient, once-daily oral dosing<sup>2</sup>



**ADA & EASD recognize JARDIANCE  
as the SGLT2 inhibitor with stronger  
evidence of CV benefits<sup>3,4</sup>**

CV: cardiovascular; RRR: relative risk reduction; ADA: American Diabetes Association; EASD: European Association for the Study of Diabetes; CV-D: cardiovascular disease; DAP: dual antidiabetic drug; T2DM: type 2 diabetes mellitus

Reference: 1. Zeman B, et al. *N Engl J Med*. 2015;373(22):2117-2124. 2. Jardiance Hong Kong Prescribing Information. 3. Davies MJ, D'Alessio DA, Fradette M, et al. *Management of Hyperglycemia in Type 2 Diabetes, 2018: A consensus report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD)*. *Diabetologia*. 2018.

<sup>1</sup> JARDIANCE demonstrated RRR in CV death in adult patients with insufficiently controlled type 2 diabetes (baseline HbA1c  $\geq 7.0\%$ ) and established CV disease (coronary artery disease, peripheral artery disease, or a history of myocardial infarction or stroke).

<sup>2</sup> Standard of care included CV medications and glucose-lowering agents given at the discretion of physicians.

<sup>3</sup> Empagliflozin versus placebo on top of standard of care.

<sup>4</sup> Management of hyperglycemia in type 2 diabetes, 2018. A consensus report by the ADA and EASD stated that among patients with established CVD, there is likely cardiovascular benefit, with the evidence of benefit modestly stronger for empagliflozin than canagliflozin.

**JARDIANCE<sup>®</sup> Abbreviated Prescribing Information (aPI-JARD-01)**

**Presentation:** Empagliflozin, film-coated tablets, 10 mg, 25 mg, and 25 mg, indicated in the treatment of type 2 diabetes mellitus to improve glycemic control, in adults as: monotherapy when diet and exercise alone do not provide adequate glycemic control in patients for whom use of insulin is considered inappropriate due to intolerance and an add-on combination therapy with other glucose-lowering medicinal products including insulin, when taken together with diet and exercise, do not provide adequate glycemic control, indicated in patients with type 2 diabetes mellitus and established cardiovascular disease to reduce the risk of cardiovascular death. 10 mg: Jardiance is indicated in adults for the treatment of symptomatic chronic heart failure with reduced ejection fraction. **Dosage and administration:** Glycemic control and reduction of risk of cardiovascular death: 10 mg once daily, in patients tolerating 10 mg once daily and requiring additional glycemic control, the dose can be increased to 25 mg once daily. Can be taken with or without food. No dose adjustment is required for patients with eGFR  $\geq 30$  mL/min/1.73m<sup>2</sup> or with hepatic impairment, or for elderly patients. **Heart failure:** 10 mg once daily, in all patients with or without T2DM. 10 mg may be initiated or continued down to an eGFR of 20 mL/min/1.73m<sup>2</sup> at a CrCl of 20 mL/min. **Cardiovascular:** Hypertension: In combination with empagliflozin or any of the co-products. For Glycemic Control and Reduction of risk of cardiovascular death, patients with severe renal impairment (eGFR  $< 30$  mL/min/1.73m<sup>2</sup>), end-stage renal disease and patients on dialysis. The efficacy of JARDIANCE is dependent on renal function. For treatment of heart failure in patients with or without T2DM, 10 mg is not recommended in patients with eGFR  $< 30$  mL/min/1.73m<sup>2</sup> or CrCl  $< 30$  mL/min. **Renal/hepatic conditions:** that may be incompatible with an occasion. **Special warnings and precautions:** Should not be used in patients with type 2 diabetes or for treatment of DM4. Discontinue immediately when DM4 is suspected or diagnosed. Treatment should be interrupted in patients who are hospitalized for major surgical procedures or acute serious medical illnesses, and may be restarted once the patient's condition has stabilized. For Glycemic control and reduction of risk of CV death, discontinue when eGFR  $< 30$  mL/min/1.73m<sup>2</sup> or CrCl  $< 30$  mL/min. For HF, not recommended when eGFR  $< 30$  mL/min/1.73m<sup>2</sup>. **Discontinue** in cases of recurrent VTE due to the risk of modest decrease in blood pressure. Caution should be exercised in patients with known cardiovascular disease, patients on diuretics, patients with history of hypotension or patients aged 75 years and older. Monitoring of volume status and electrolytes is recommended. **Precaution:** Patients should be advised to avoid excessive heat exposure. **Caution:** is advised in patients at increased risk of genital infections. Avoid use during pregnancy and breast-feeding. **Safety and effectiveness** in children under 18 years of age have not been established. **Initiation is not recommended** in patients aged 75 years and older. **Urine** will test positive for glucose while patients are taking JARDIANCE. **Interactions:** Risk of dehydration and hypotension may increase when used in combination with thiazide and loop diuretics. Lower dose of insulin or an insulin analog may be required to reduce the risk of hypoglycemia when used in combination with INSULIN. **Adverse reactions:** hypoglycemia (depends on type of hypoglycemia treatment of patient), urinary tract infection, vaginal moniliasis, vulvovaginitis, balanitis and other genital infection; increased urination, dysuria; Pruritus; Volume depletion; Thirst; Glomerular filtration rate decreased, blood creatinine increased, haematocrit increased, serum lipids increased. **Post-marketing experience:** Neutropenia, arthropalgia, pyomyositis, necrotizing fasciitis of the perineum (Fournier's gangrene), allergic skin reaction, angioedema. **Storage conditions:** Please refer to outer packaging for special precautions for storage. **Note:** Before prescribing, please consult full prescribing information.



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**THE ONLY  
OAD WITH CV  
INDICATION**  
Jardiance is indicated in  
T2DM patients and established  
cardiovascular disease to  
reduce the risk of  
cardiovascular death<sup>1</sup>