



AMERICAN  
COLLEGE of  
CARDIOLOGY®

# DAPA-MI

Dapagliflozin in Myocardial Infarction (MI)  
Without Diabetes (T2D) or Heart Failure (HF)

**International, Registry-Based, Randomized,  
Double-Blind, Placebo-Controlled Trial**

**OBJECTIVE:** To evaluate one-year outcomes of a composite of death, HF hospitalization and cardiometabolic factors in patients with acute MI randomized to dapagliflozin or placebo.

**4,017**  
PATIENTS

**INCLUSION CRITERIA:** Patients  $\geq 18$  years hospitalized for an acute MI; impaired left ventricular systolic function; no known T2D or HF; no prior SGLT2i therapy



**DAPAGLIFLOZIN  
10 MG (N=2,019)**

vs.



**PLACEBO  
(N=1,998)**

## PRIMARY ENDPOINT

**A HIERARCHICAL COMPOSITE OF DEATH, HF HOSPITALIZATION, NONFATAL MI, ATRIAL FIBRILLATION/FLUTTER, T2D, NYHA CLASS AND BODY WEIGHT DECREASE  $\geq 5\%$  AT LAST VISIT RESULTED IN 32.9% VS. 24.6% WINS FOR DAPAGLIFLOZIN VS. PLACEBO (WIN RATIO 1.34,  $P < 0.001$ ).**

## SECONDARY ENDPOINT

**TIME TO CARDIOVASCULAR DEATH OR HF HOSPITALIZATION DID NOT DIFFER BETWEEN GROUPS (2.5% WITH DAPAGLIFLOZIN VS. 2.6% WITH PLACEBO).**

## CONCLUSION

At one year after acute MI, patients who received dapagliflozin vs. placebo attained significant improvement in cardiometabolic outcomes without an effect on a composite of cardiovascular death or HF hospitalization.

James S, Erlinge D, Storey RF, et al. Dapagliflozin in Myocardial Infarction Without Diabetes or Heart Failure. *NEJM Evidence* 2023;Nov 11:[Epublished].

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