Early Initiation of SGLT2i:
The New Horizon of Evidence in Cardiovascular Protection

Biography

Professor Javed BUTLER (MD, MPH, MBA) is the President of the Baylor Scott and White Research Institute and Senior Vice President for the Baylor Scott and White Health in Dallas, Texas. He currently holds the Maxwell A. and Gayle H. Clampitt Endowed Chair for research. He is also the Distinguished Professor of Medicine at University of Mississippi in Jackson, Mississippi.

He received his medical degree from the Aga Khan University and completed residency at Yale, cardiology fellowship and advanced heart failure and transplant fellowships at Vanderbilt, and cardiac imaging fellowship at the Massachusetts General Hospital at the Harvard Medical School. He has completed Master of Public Health degree from Harvard and Master of Business Administration from Emory University.

Dr Butler is board certified in cardiovascular medicine and in advanced heart failure and transplant. His research interests focus on clinical trials in heart failure. He serves on national committees for the ACC, AHA, NIH, and the HFSA. He is the recipient of the Simon Dack Award by the ACC as well as the Time, Feeling, and Focus Award by the AHA.

Dr Butler has authored more than 1100 peer-reviewed publications. He serves on the editorial board of several peer reviewed cardiovascular journals.

Abstract

Heart failure is a devastating and progressive disease that affects a considerable number of individuals worldwide, with an estimated 60 million people currently affected. It is expected to prevail as the population ages and better survival from cardiovascular diseases. Approximately half of all diagnosed patients are projected to succumb to the disease within a five-year period, highlighting the need for better treatment.

There have been promising developments in heart failure treatment. Sodium-glucose cotransporter 2 (SGLT2) inhibitors have demonstrated significant efficacy in reducing the risk of cardiovascular death or hospitalizations. Early benefits with empagliflozin were observed in improving quality of life and reducing mortality. These benefits have been consistent in patients across the entire spectrum of left ventricular ejection fraction.

Empagliflozin additionally provided evidence for in-hospital initiation of empagliflozin in patients with acute heart failure following stabilization in the EMPULSE study. Clinical benefit was observed for both acute de novo and decompensated chronic heart failure and was observed regardless of ejection fraction or the presence or absence of diabetes.

In this lecture, the latest clinical evidence on the use of SGLT2 inhibitors in this setting and the practical guidance for implementation will be discussed.