



Sales Teams

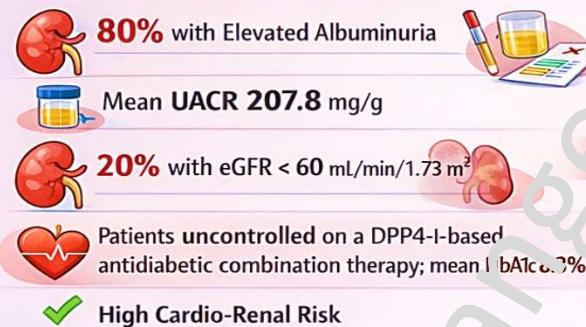


One-line detailing: In this Indian study, a fixed dose combination of empagliflozin and linagliptin for 12 months in diabetes patients uncontrolled on DPP4-i-based treatment, led to improvement in albuminuria and eGFR along with diabetes control

Leave-behind

Real-World Impact of Empagliflozin + Linagliptin in T2DM (N=433, 12-Month Indian Study)

BEFORE Switching



12 Months AFTER Switching



Insights

- ✓ Albuminuria remains a modifiable and early marker of CKD risk in T2DM
- ✓ Early eGFR Dip in SC T2-i: Expected, Not Harm
- ✓ Complementary agents enable Glycemic & Renal Benefits

Clinical Implications



Routinely track **BOTH UACR & eGFR Trends in Diabetes Care**



Primary message

This real-world study confirms renal signal consistency (UACR reduction + eGFR stabilization) outside controlled trial settings.

Supporting messages

- **Albuminuria is an early, modifiable marker of CKD risk in T2DM.**
- **Early eGFR dip with SGLT2 inhibitors is expected and reversible, not a safety signal.**
- **Dual-mechanism therapy allows simultaneous glycemic and renal risk modification.**

Dual Action, Triple Benefit: Empagliflozin-Linagliptin for T2DM & Kidney Health

12-Month Retrospective Study | 433 Patients | Key Clinical Outcomes

MAJOR IMPROVEMENTS IN KIDNEY HEALTH

71.8%

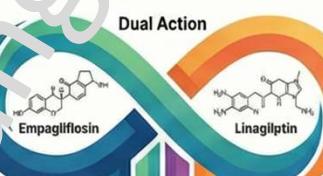
of Patients Saw a Clinically Meaningful Reduction in Albuminuria

Mean Urine Albumin-Creatinine Ratio (UACR) dropped significantly by 142.9 mg/g.

eGFR rose **1.9 mL/min/1.73 m²**
Kidney Function Stabilized and Improved After an Initial Dip

2.2x

Higher Odds of Achieving Normal Albuminuria



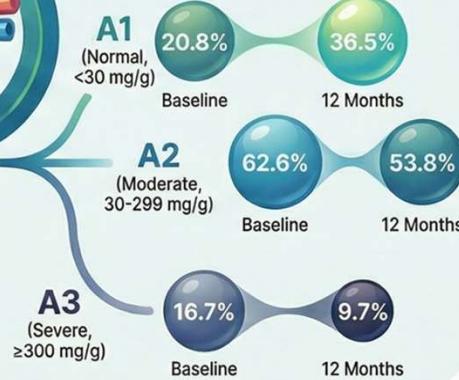
ENHANCED GLYCEMIC CONTROL

1.5%

Absolute Reduction in HbA1c

Glycated hemoglobin dropped from a mean of 8.3% to 6.7%.

Positive Shift in Albuminuria Risk Categories



METABOLIC CONTROL

3.3 kg

Average Weight Loss

Mean body weight decreased from 68.7 kg to 68.4 kg over 12 months.



Primary message

Renal outcomes should be interpreted longitudinally, not cross-sectionally.

Supporting messages

- **UACR reduction** is a clinically meaningful early win, even before hard renal endpoints.
- **eGFR changes** must be interpreted in context and over time.
- **Monitoring both UACR and eGFR** provides a more complete renal risk picture.

Initial eGFR Dip Followed by Stabilization and Recovery Over 12 Months



This initial hemodynamic dip is a characteristic effect of SGLT2-i therapy and is typically reversible.

What clinicians should walk away thinking

“I need to look at trends, not isolated numbers, when managing diabetic kidney risk.”



Primary message

Real-world data offer practical lessons for day-to-day renal monitoring in diabetes.

Supporting messages

- **Albuminuria remains under-recognized but highly actionable.**
- **Misinterpretation of early renal changes can lead to unnecessary concern.**
- **Real-world studies complement RCTs by showing what actually happens in practice.**

