

SUPPLEMENTAL MATERIAL

Table S1. Electronic Search Terms.

MEDLINE via OVID

- 1 canagliflozin.mp. or Canagliflozin/
- 2 dapagliflozin.mp.
- 3 empagliflozin.mp.
- 4 ertugliflozin.mp.
- 5 type 2 diabetes mellitus.mp. or Diabetes Mellitus, Type 2/
- 6 Diabetes Mellitus, Type 2/ or T2DM.mp.
- 7 Coronary Disease/ or Cardiovascular Diseases/ or Myocardial Infarction/ or cardiovascular mortality.mp.
- 8 Acute Coronary Syndrome/
- 9 heart failure.mp. or Heart Failure/
- 10 Stroke/
- 11 Mortality/
- 12 1 or 2 or 3 or 4
- 13 5 or 6
- 14 7 or 8 or 9 or 10 or 11
- 15 12 and 13 and 14
16. Limit 15 human

EMBASE via OVID

- 1 canagliflozin.mp. or Canagliflozin/
- 2 dapagliflozin.mp.
- 3 empagliflozin.mp.
- 4 ertugliflozin.mp.
- 5 type 2 diabetes mellitus.mp. or Diabetes Mellitus, Type 2/
- 6 Diabetes Mellitus, Type 2/ or T2DM.mp.
- 7 Coronary Disease/ or Cardiovascular Diseases/ or Myocardial Infarction/ or cardiovascular mortality.mp.
- 8 Acute Coronary Syndrome/
- 9 heart failure.mp. or Heart Failure/
- 10 Stroke/
- 11 Mortality/
- 12 1 or 2 or 3 or 4
- 13 5 or 6
- 14 7 or 8 or 9 or 10 or 11
- 15 12 and 13 and 14
16. Limit 15 human

Table S2. Risk of Bias Assessment.

	Sequence generation	Allocation sequence concealment	Blinding of participants and personnel	Blinding of outcome assessment	Incomplete outcome data	Selective outcome reporting
EMPA-REG	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk
CANVAS Program	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk
DECLARE-TIMI 58	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk
CREDESCENCE	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk

Figure S1. PRISMA Flow Chart: Identification of Eligible Studies.

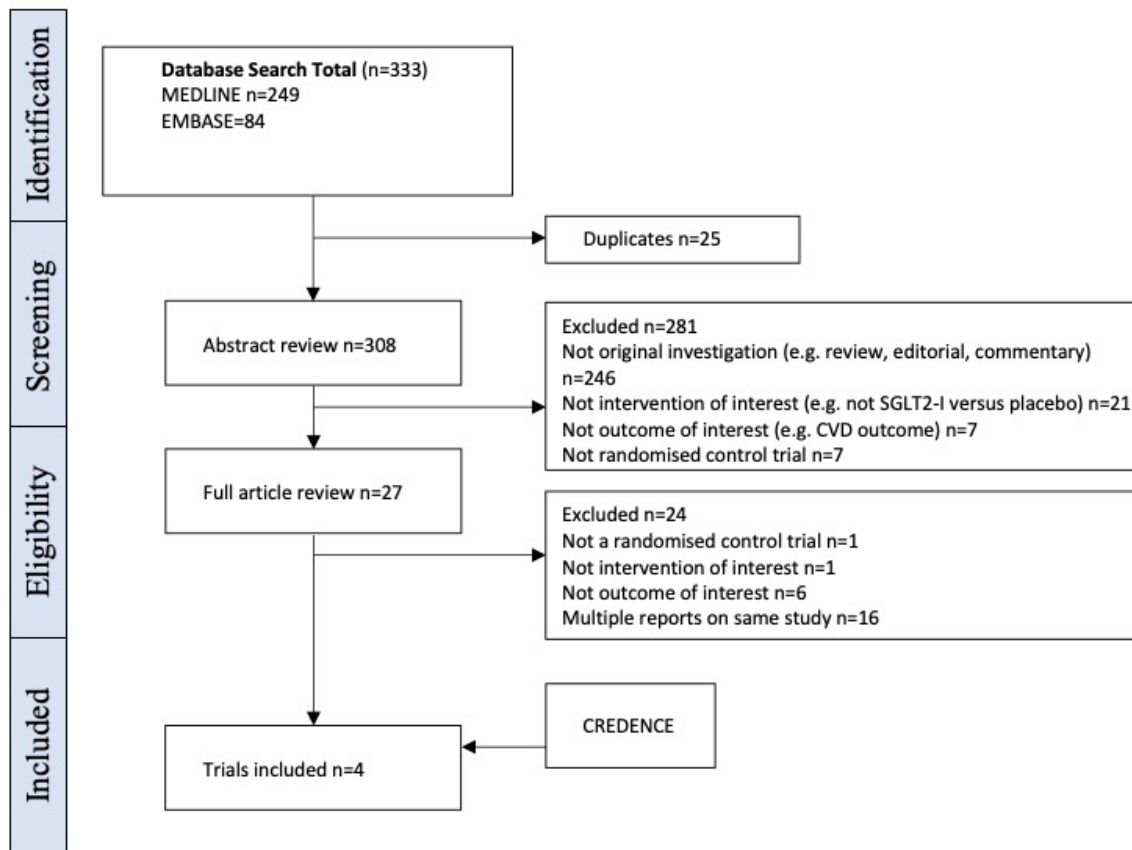


Figure S2A. Effects of SGLT2 inhibition on MACE, CV death, total MI and total stroke for patients with (secondary prevention) and without (primary prevention) cardiovascular disease at baseline.

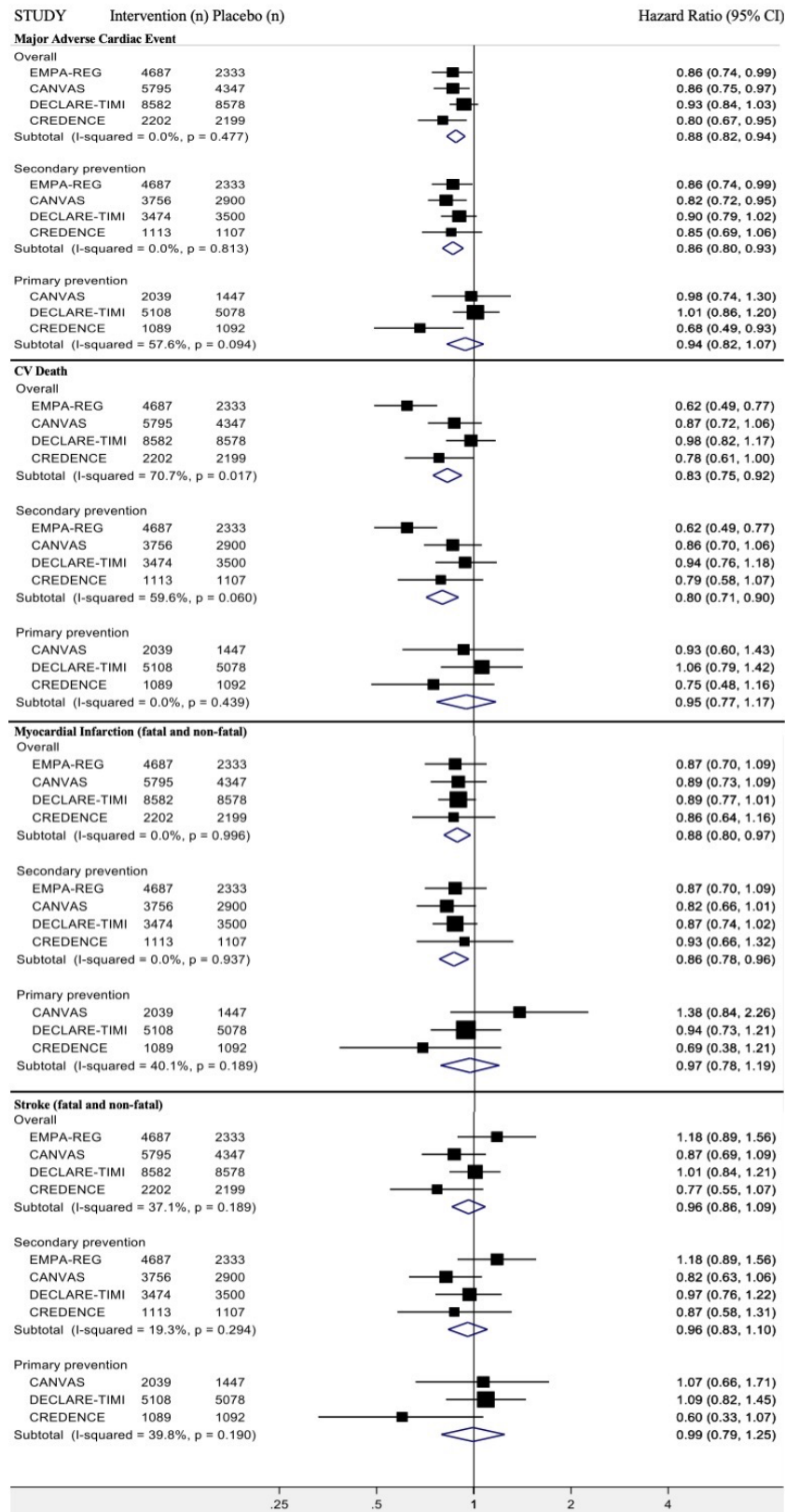


Figure S2B. Effects of SGLT2 inhibition on HF hospitalization, CV death/HF hospitalization and all cause mortality for patients with (secondary prevention) and without (primary prevention) cardiovascular disease at baseline

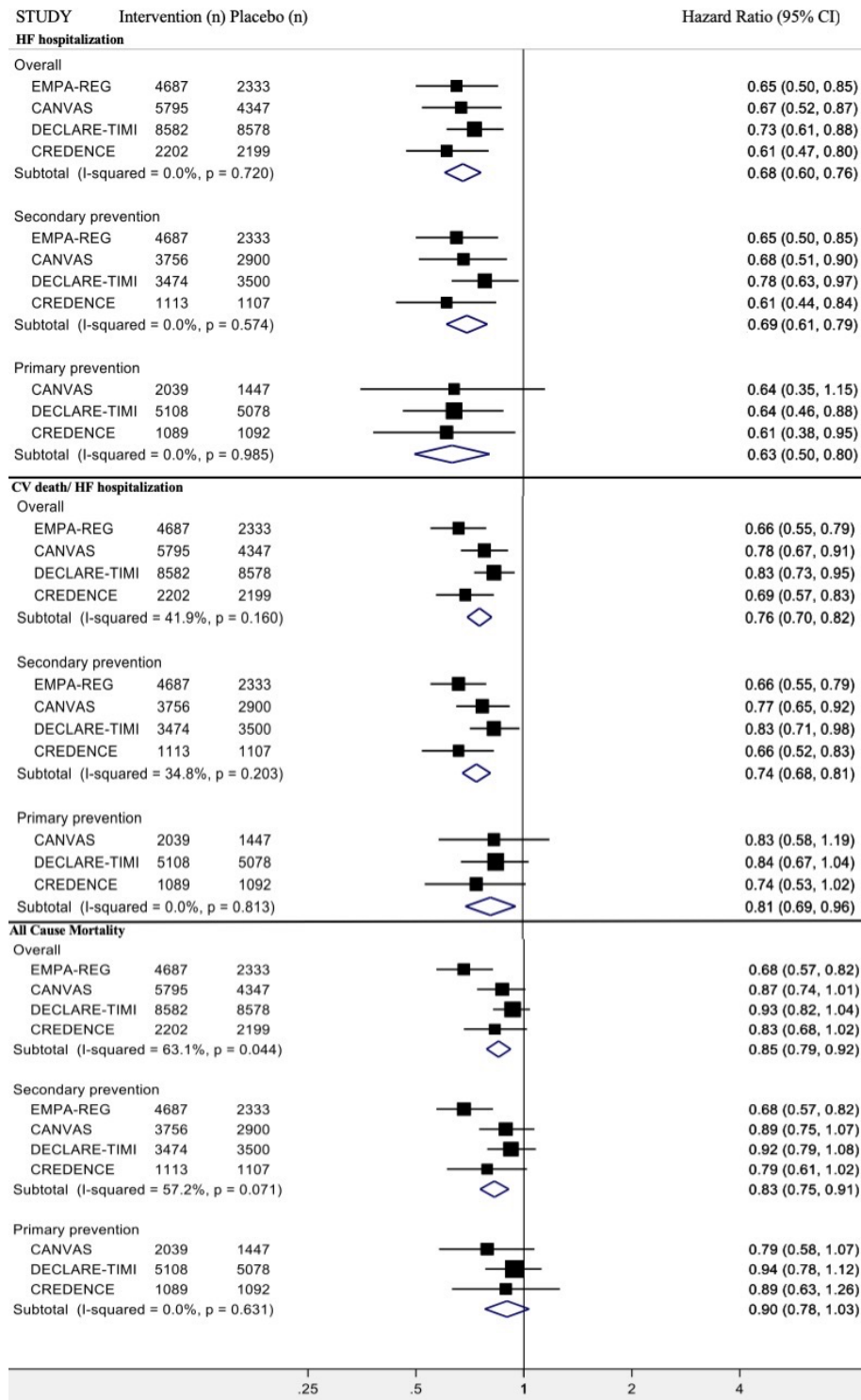


Figure S2C. Effects of SGLT2 inhibition on non-fatal MI and stroke for patients with (secondary prevention) and without (primary prevention) cardiovascular disease at baseline

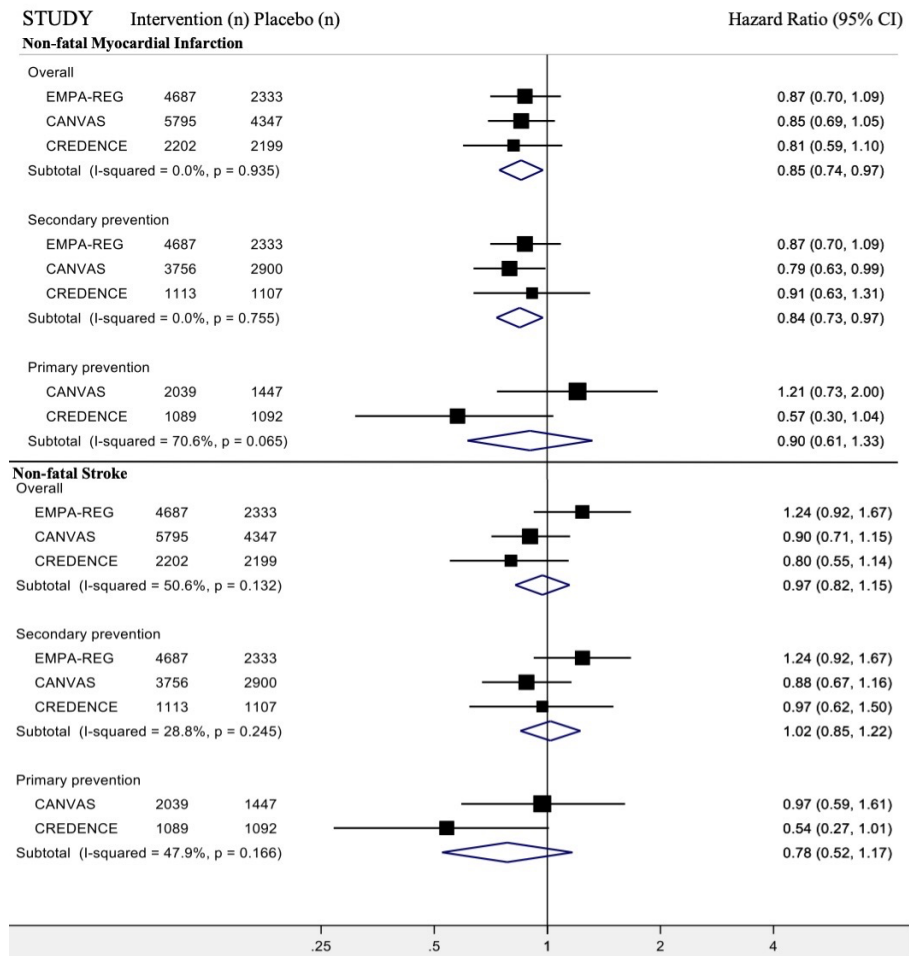


Figure S3A. Effects of SGLT2 inhibition on MACE, CV death, total MI and total stroke for patient with (estimated glomerular filtration rate <60mls/min/1.73m²) and without (estimated glomerular filtration rate >60mls/min/1.73m²) reduced kidney function at baseline, for each included study

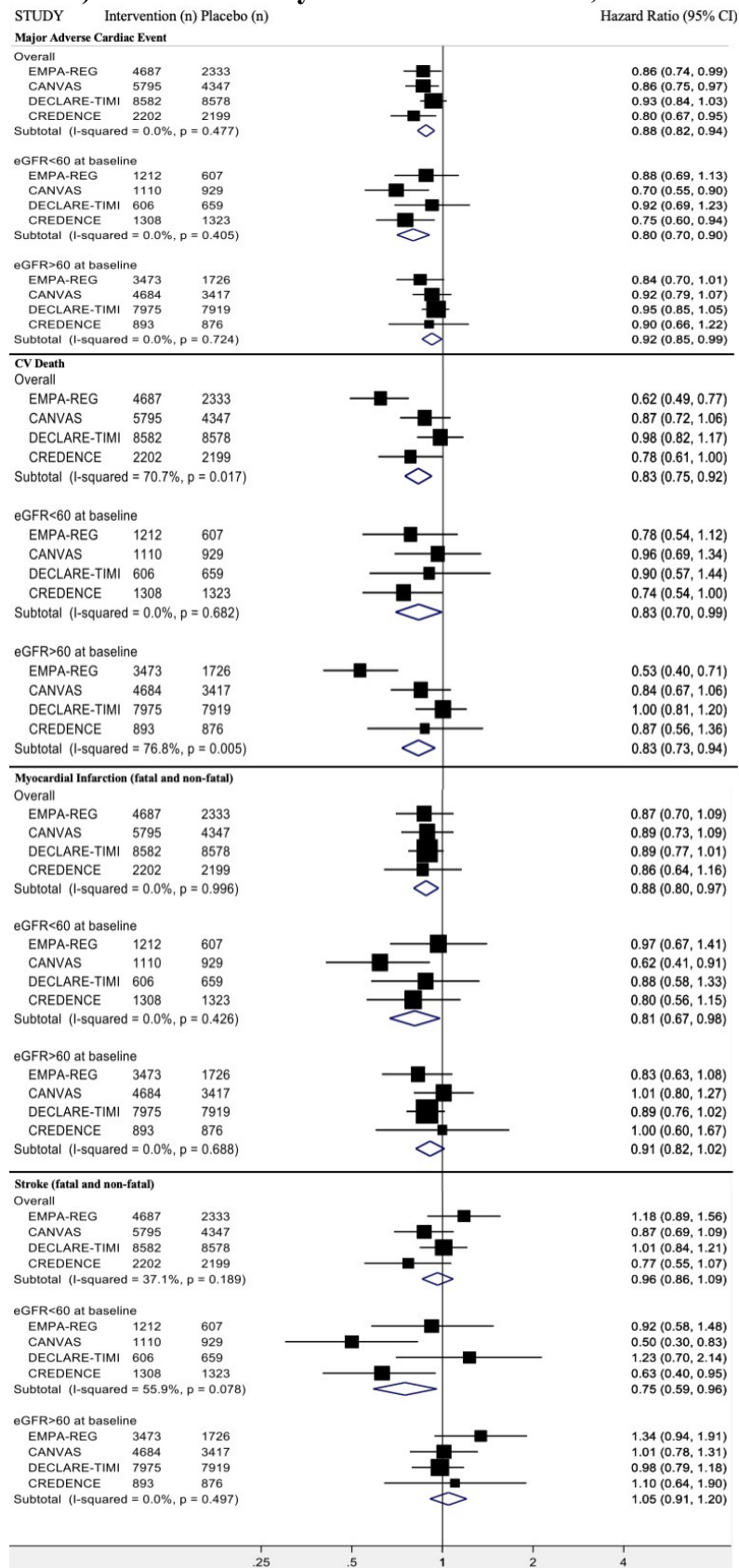


Figure S3B. Effects of SGLT2 inhibition on HF hospitalization, CV death/HF hospitalization and all cause mortality for patients with (estimated glomerular filtration rate <60mls/min/1.73m²) and without (estimated glomerular filtration rate >60mls/min/1.73m²) reduced kidney function at baseline, for each included study

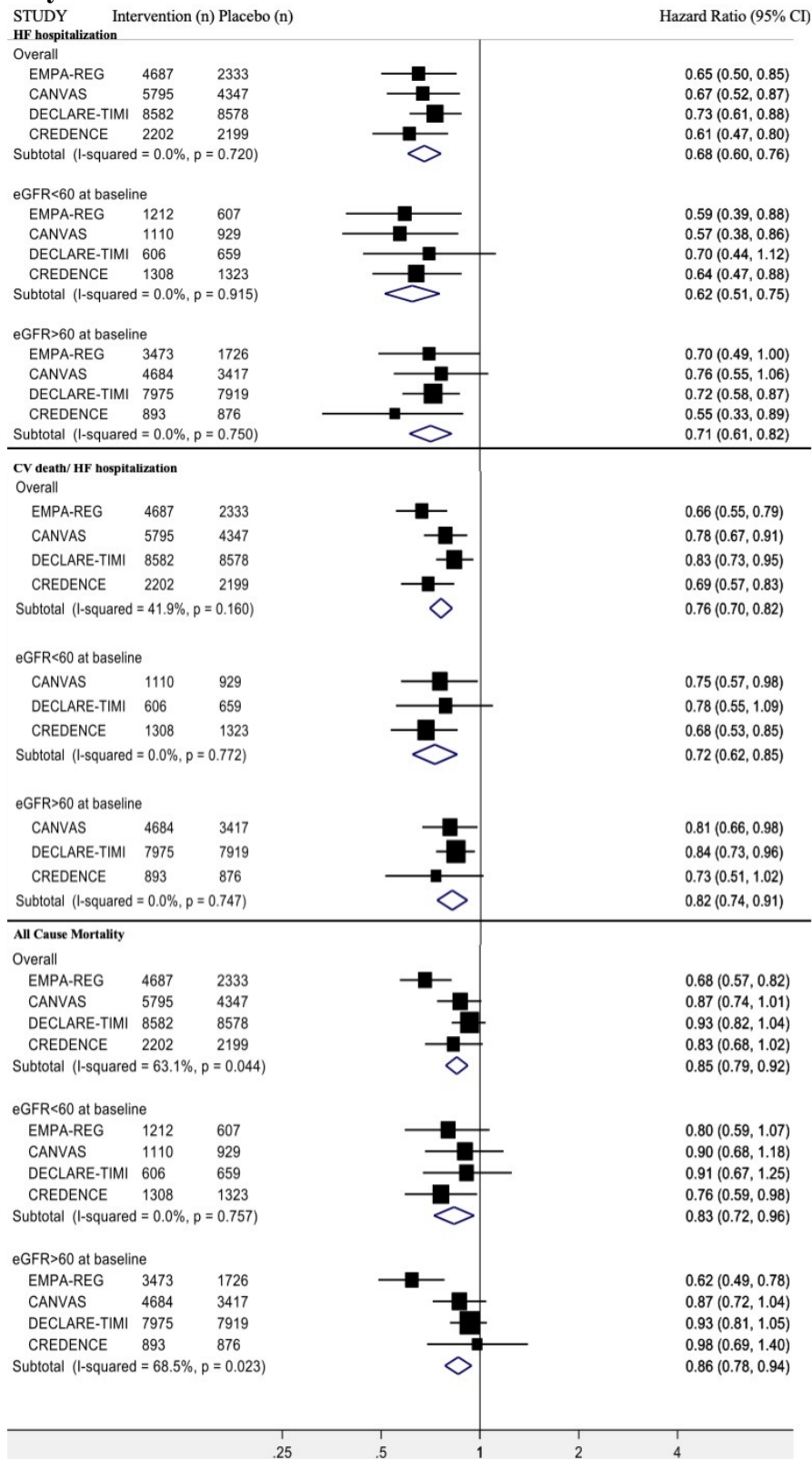


Figure S3C. Effects of SGLT2 inhibition on non-fatal MI and stroke for patients with (estimated glomerular filtration rate <60mls/min/1.73m²) and without (estimated glomerular filtration rate >60mls/min/1.73m²) reduced kidney function at baseline, for each included study

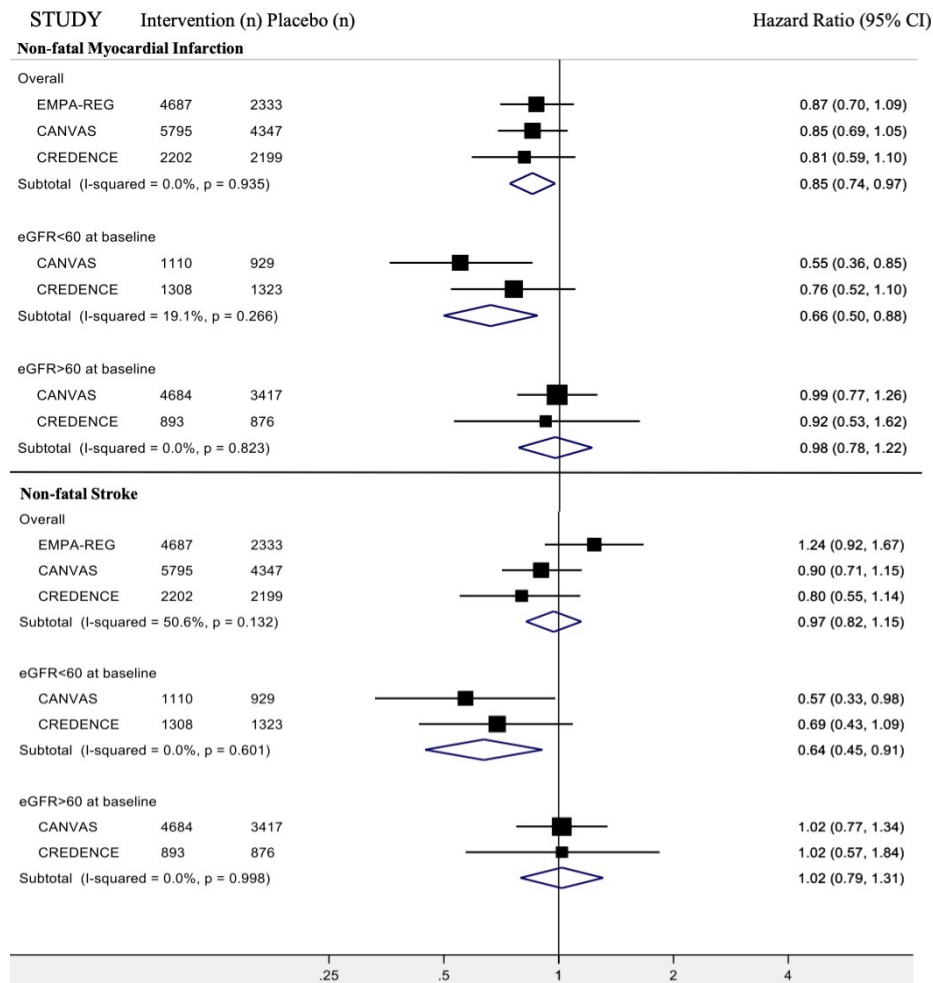


Figure S4A. Effects of SGLT2 inhibition on MACE, CV death, total MI and total stroke for patients with and without a history of heart failure at baseline, for each included study

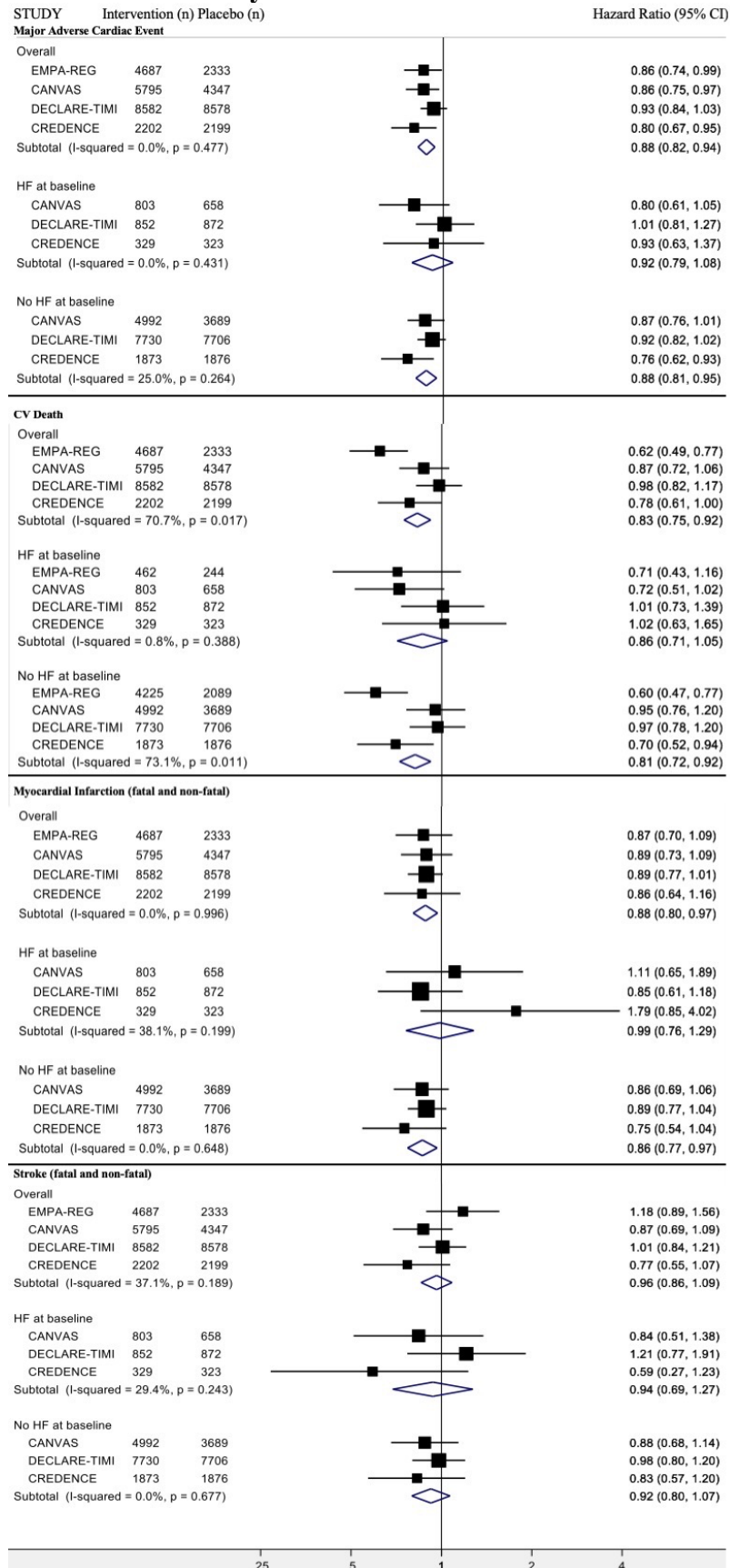


Figure S4B. Effects of SGLT2 inhibition on HF hospitalization, CV death/HF hospitalization and all cause mortality for patients with and without a history of heart failure at baseline, for each included study

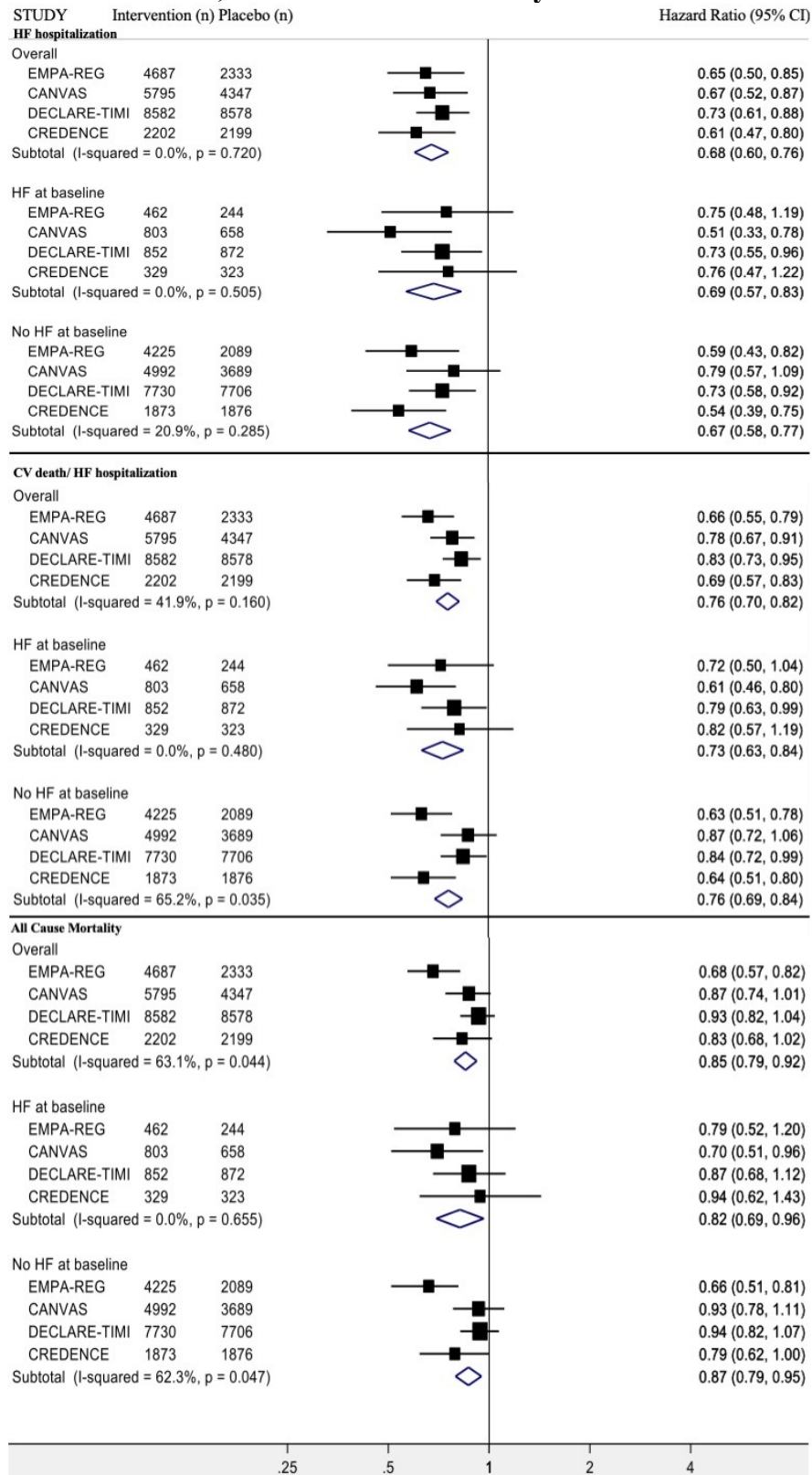


Figure S4C. Effects of SGLT2 inhibition on non-fatal MI and stroke for patients with and without a history of heart failure at baseline, for each included study

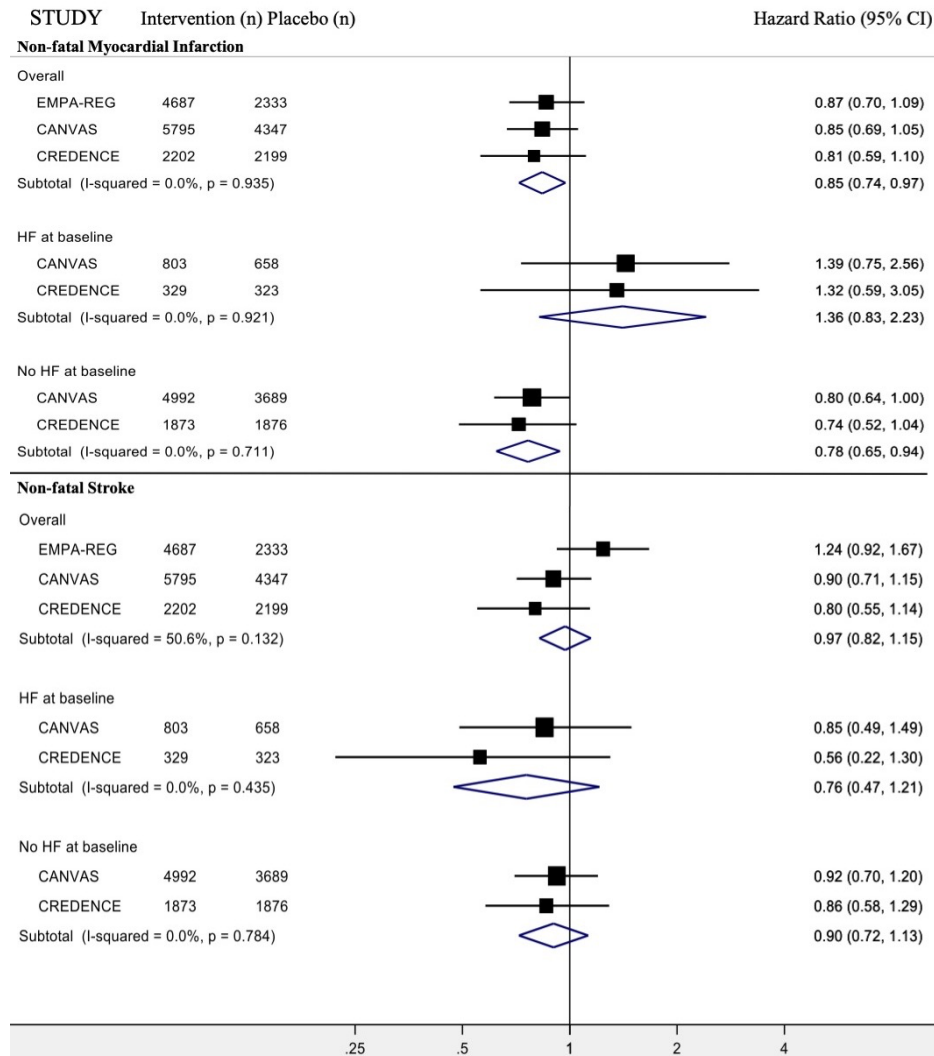


Figure S5. Sensitivity Analysis for the Outcome of Serious Adverse Events without inclusion of Risk Ratios

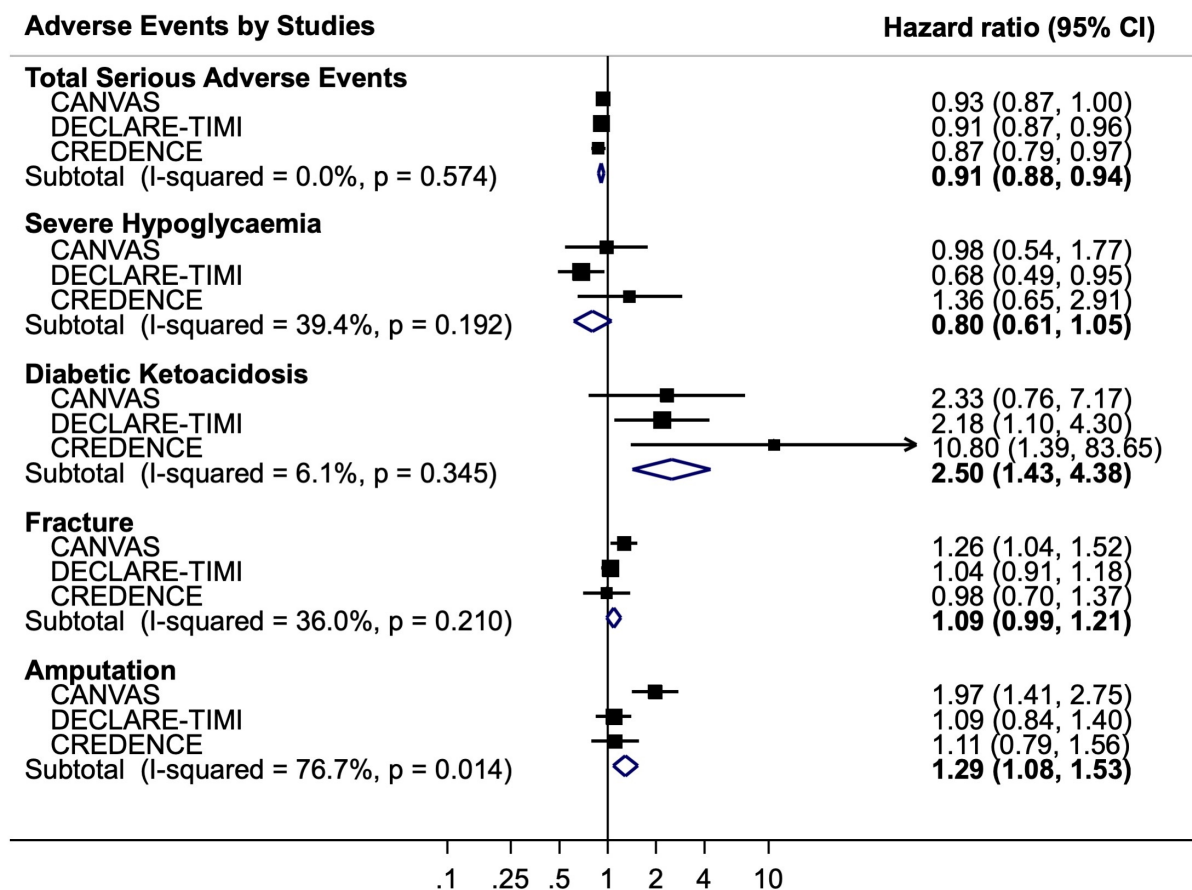


Figure S6. The Effects of SGLT2 inhibition on Major Adverse Cardiac Outcomes for patients depending on Urine Albumin Creatinine Ratio at baseline

