



PROGLIF TABLETS

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Comparative effectiveness of empagliflozin versus dapagliflozin in adults with metabolic dysfunction-associated steatotic liver disease

Wu J-Y, et.al; *Front. Endocrinol.* 16:1669613, (2025).

- Sodium-glucose co-transporter-2 inhibitors (SGLT2is) show promise in treating metabolic dysfunction-associated steatotic liver disease (MASLD). However, the relative efficacy of different SGLT2is remains unclear.
- 13274 patient retrospective data from the TriNetX database was extracted for patients on Empagliflozin & Dapagliflozin each. The primary outcome was a composite of all-cause hospitalization, all-cause mortality, major adverse cardiovascular events (MACEs), major adverse kidney events (MAKEs), and decompensated hepatic events.
- Empagliflozin was associated with a lower risk of primary composite outcomes compared to dapagliflozin (HR, 0.84; 95% CI, 0.80-0.88). This benefit was consistent across most subgroups, including sex, presence of liver cirrhosis, heart failure, T2DM, and chronic kidney disease.
- Empagliflozin also showed lower risks for all-cause hospitalization (HR, 0.84; 95% CI, 0.79-0.88), all-cause mortality (HR, 0.79; 95% CI, 0.66-0.96), MACE (HR, 0.88; 95% CI, 0.78-0.99), and MAKE (HR, 0.63; 95% CI, 0.47-0.86), but no difference in decompensated hepatic events (HR, 1.01; 95% CI, 0.81-1.27)

In patients with MASLD, empagliflozin was associated with better clinical outcomes compared to dapagliflozin, particularly in reducing cardiovascular and renal events, hospitalizations, and mortality.

