

FOR ADULTS WITH KNOWN HEART DISEASE AND TYPE 2 DIABETES,

**EVEN IF YOU ARE MANAGING A1C,  
YOUR PATIENTS MAY STILL BE AT RISK FOR  
A FATAL CARDIOVASCULAR (CV) EVENT**

**PRESCRIBE**

**Jardiance**<sup>®</sup>   
(empagliflozin) tablets  
10 mg/25 mg

**PLEASE VISIT  
[JARDIANCEHCP.COM](http://JARDIANCEHCP.COM)  
TO LEARN WHY**

### **INDICATIONS AND LIMITATIONS OF USE**

JARDIANCE is indicated to reduce the risk of cardiovascular (CV) death in adults with type 2 diabetes mellitus and established CV disease.

JARDIANCE is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

JARDIANCE is not recommended for patients with type 1 diabetes or for the treatment of diabetic ketoacidosis.

Please see additional Important Safety Information for JARDIANCE on the following pages.  
Please see accompanying Prescribing Information, including Medication Guide.

FOR ADULTS WITH KNOWN HEART DISEASE AND TYPE 2 DIABETES,  
**THERE'S MORE TO TYPE 2 DIABETES  
AND TREATMENT THAN A1C**

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Over time, high blood sugar levels can lead to a buildup of plaque in the blood vessels, **increasing the chance of future heart problems**, like a heart attack or stroke.



Type 2 diabetes **doubles the risk** of dying from a CV event. When a patient has type 2 diabetes and CV disease, heart attacks are more serious and more likely to be fatal.



JARDIANCE is FDA-approved to go beyond lowering A1C by offering a groundbreaking CV benefit—reducing the risk of CV death.

## IMPORTANT SAFETY INFORMATION

**CONTRAINDICATIONS:** History of serious hypersensitivity to empagliflozin or any of the excipients in JARDIANCE; severe renal impairment, end-stage renal disease, or dialysis.

## WARNINGS AND PRECAUTIONS

**Hypotension:** Empagliflozin causes intravascular volume contraction and symptomatic hypotension may occur. Before initiating JARDIANCE, assess and correct volume status in the elderly, and in patients with renal impairment, low systolic blood pressure, or on diuretics. Monitor for hypotension.

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## IMPORTANT SAFETY INFORMATION (continued)

**Ketoacidosis:** Ketoacidosis, a serious life-threatening condition requiring urgent hospitalization, has been identified in patients with type 1 and type 2 diabetes mellitus receiving SGLT2 inhibitors, including empagliflozin. Fatal cases of ketoacidosis have been reported in patients taking empagliflozin. Patients who present with signs and symptoms of metabolic acidosis should be assessed for ketoacidosis, even if blood glucose levels are less than 250 mg/dL. If suspected, discontinue JARDIANCE, evaluate, and treat promptly. Before initiating JARDIANCE, consider risk factors for ketoacidosis. Patients may require monitoring and temporary discontinuation in situations known to predispose to ketoacidosis.

**Acute Kidney Injury and Impairment in Renal Function:** Empagliflozin causes intravascular volume contraction and can cause renal impairment. Acute kidney injury requiring hospitalization and dialysis have been identified in patients taking SGLT2 inhibitors, including empagliflozin; some reports involved patients younger than 65 years of age. Before initiating JARDIANCE, consider factors that may predispose patients to acute kidney injury. Consider temporary discontinuation in settings of reduced oral intake or fluid losses. Monitor patients for signs and symptoms of acute kidney injury. If it occurs, discontinue JARDIANCE and treat promptly.

Empagliflozin increases serum creatinine and decreases eGFR. Patients with hypovolemia may be more susceptible to these changes. Before initiating JARDIANCE, evaluate renal function and monitor thereafter. More frequent monitoring is recommended in patients with eGFR <60 mL/min/1.73 m<sup>2</sup>. Discontinue JARDIANCE in patients with a persistent eGFR <45 mL/min/1.73 m<sup>2</sup>.

**Urosepsis and Pyelonephritis:** Serious urinary tract infections including urosepsis and pyelonephritis requiring hospitalization have been identified in patients receiving SGLT2 inhibitors, including empagliflozin. Treatment with SGLT2 inhibitors increases the risk for urinary tract infections. Evaluate for signs and symptoms of urinary tract infections and treat promptly.

**Hypoglycemia:** The use of JARDIANCE in combination with insulin or insulin secretagogues can increase the risk of hypoglycemia. A lower dose of insulin or the insulin secretagogue may be required.

**Necrotizing Fasciitis of the Perineum (Fournier's Gangrene):** Serious, life-threatening cases have occurred in both females and males. Assess patients presenting with pain or tenderness, erythema, or swelling in the genital or perineal area, along with fever or malaise. If suspected, institute prompt treatment and discontinue JARDIANCE.

**Genital Mycotic Infections:** Empagliflozin increases the risk for genital mycotic infections, especially in patients with prior infections. Monitor and treat as appropriate.

**Hypersensitivity Reactions:** Discontinue JARDIANCE, treat promptly, and monitor until signs and symptoms resolve.

**Increased Low-Density Lipoprotein Cholesterol (LDL-C):** Monitor and treat as appropriate.

**MOST COMMON ADVERSE REACTIONS (≥5%):** Urinary tract infections and female genital mycotic infections.

**DRUG INTERACTIONS:** Coadministration with diuretics may enhance the potential for volume depletion.

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JARDIANCE is prescribed for its cardiovascular (CV) benefit to reduce the risk of CV death for patients with type 2 diabetes and known heart disease.

## IMPORTANT SAFETY INFORMATION (continued)

### USE IN SPECIAL POPULATIONS

**Pregnancy:** JARDIANCE is not recommended, especially during the second and third trimesters.

**Lactation:** JARDIANCE is not recommended while breastfeeding.

**Geriatric Use:** JARDIANCE is expected to have diminished efficacy in elderly patients with renal impairment. Renal function should be assessed more frequently in elderly patients. The incidence of volume depletion-related adverse reactions and urinary tract infections increased in patients  $\geq 75$  years treated with empagliflozin.

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