**Supplementary Figure S1. Flow diagram for study selection.**

**텍스트이(가) 표시된 사진

자동 생성된 설명**

**Supplementary Figure S2. Risk of bias among trials included in the meta-regression.**

in green color indicates a low risk of bias.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CANVAS programme | CREDENCE | DECLARE-TIMI 58 | EMPA-REG OUTCOME | VERTIS-CV | SCORED | EXSCEL | LEADER | REWIND | Harmony | SUSTAIN-6 | PIONEER 6 | AMPLITUDE-O |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Bias arising from the randomization process |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Bias due to deviations from intended interventions |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Bias due to missing outcome data |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Bias in measurement of the outcome |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Bias in selection of the reported result |

**Supplementary Figure S3. Meta-regression between RRR for 3P-MACE by SGLT-2i or GLP-1RA therapy and the proportion of patients with reduced eGFR (< 60 mL/min/1.73 m2) (A, B) or the proportion of patients with albuminuria (**≥ **30 mg/g) (C, D).** The coefficient represents the slope of the regression line, which is present when there is significance with P-value under 0.05. R2 indicates the strength of the association of the characteristics. eGFR, estimated glomerular filtration ratio; GLP-1RA, glucagon-like peptide 1 receptor agonists; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

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| (A) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and the proportion of patients with reduced eGFR (< 60 mL/min/1.73 m2) | (B) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and the proportion of patients with reduced eGFR (< 60 mL/min/1.73 m2) |
|  |  |
| (C) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and proportion of patients with albuminuria (≥ 30 mg/g) | (D) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and proportion of patients with albuminuria (≥ 30 mg/g) |
|  |  |

**Supplementary Figure S4. Comparison of RRR for 3P-MACE according to baseline eGFR category and albuminuria status in SGLT-2i (A, C) or GLP-1RA (B, D) trials.** The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. CI, confidence interval; eGFR, estimated glomerular filtration ratio; GLP-1RA, glucagon-like peptide 1 receptor agonists; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| (A) Efficacy comparison on RRR for 3P-MACE according to baseline eGFR category in SGLT-2i trials | (B) Efficacy comparison on RRR for 3P-MACE according to baseline eGFR category in GLP-1RA trials |
|  |  |
| (C) Efficacy comparison on RRR for 3P-MACE according to albuminuria status in SGLT-2i trials | (D) Efficacy comparison on RRR for 3P-MACE according to albuminuria status in GLP-1RA trials |
|  |  |

**Supplementary Figure S5. Efficacy comparison between SGLT-2i and GLP-1RA therapies on relative risk reduction for 3P-MACE according to baseline eGFR category (A, B) and albuminuria status (C, D).** The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. CI, confidence interval; eGFR, estimated glomerular filtration ratio; GLP-1RA, glucagon-like peptide 1 receptor agonists; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| (A) Comparison between SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in normal eGFR | (B) Comparison between SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in reduced eGFR |
|  |  |
| (C) Comparison between SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in normoalbuminuria | (D) Comparison between SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in albuminuria |
|  |  |

**Supplementary Figure S6. Absolute risk reduction (A~D) and Relative risk reduction (E~H) for 3P-MACE by baseline age.** The coefficient represents the slope of the regression line. R2 indicates the strength of the association of the characteristics. The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. ARR, absolute risk reduction; CI, confidence interval; GLP-1RA, glucagon-like peptide 1 receptor agonists; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| **(A) Meta-regression between ARR for 3P-MACE by SGLT-2i therapy and average age** | **(B) Meta-regression between ARR for 3P-MACE by GLP-1RA therapy and average age** |
|  |  |
| **(C) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in younger age group** | **(D) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in older age group** |
|  |  |

|  |  |
| --- | --- |
| **(E) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and average age** | **(F) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and average age** |
|  |  |
| **(G) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in younger age group** | **(H) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in older age group** |
|  |  |

**Supplementary Figure S7. Absolute risk reduction (A~D) and Relative risk reduction (E~H) for 3P-MACE by baseline sex.** The coefficient represents the slope of the regression line. R2 indicates the strength of the association of the characteristics. The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. ARR, absolute risk reduction; CI, confidence interval; GLP-1RA, glucagon-like peptide 1 receptor agonists; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| **(A) Meta-regression between ARR for 3P-MACE by SGLT-2i therapy and the proportion of men** | **(B) Meta-regression between ARR for 3P-MACE by GLP-1RA therapy and the proportion of men** |
|  |  |
| **(C) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in men** | **(D) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in women** |
|  |  |
| **(E) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and the proportion of men** | **(F) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and the proportion of men** |
|  |  |
| **(G) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in men** | **(H) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in women** |
|  |  |

**Supplementary Figure S8. Absolute risk reduction (A~D) and Relative risk reduction (E~H) for 3P-MACE by baseline BMI level.** BMI level was divided by 30 kg/m2 except for AMPLITUDE-O trial, which used 31.9 kg/m2 (the median). The coefficient represents the slope of the regression line. R2 indicates the strength of the association of the characteristics. The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. ARR, absolute risk reduction; BMI, body mass index; CI, confidence interval; GLP-1RA, glucagon-like peptide 1 receptor agonists; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| **(A) Meta-regression between ARR for 3P-MACE by SGLT-2i therapy and average BMI level** | **(B) Meta-regression between ARR for 3P-MACE by GLP-1RA therapy and average BMI level** |
|  |  |
| **(C) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in the patients with low BMI** | **(D) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in the patients with high BMI** |
|  |  |
| **(E) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and average BMI level** | **(F) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and average BMI level** |
|  |  |
| **(G) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in the patients with low BMI** | **(H) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in the patients with high BMI** |
|  |  |

**Supplementary Figure S9. Absolute risk reduction (A~D) and Relative risk reduction (E~H) for 3P-MACE by baseline HbA1c level.** Criteria for HbA1c level was different among the trials: most used 8.0%; 8.5% was used in EMPA-REG, VERTIS-CV, SUSTAIN-6, and PIONEER 6; 8.3% in LEADER; and 7.0% in REWIND. The coefficient represents the slope of the regression line. R2 indicates the strength of the association of the characteristics. The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. ARR, absolute risk reduction; CI, confidence interval; GLP-1RA, glucagon-like peptide 1 receptor agonists; HbA1c, glycated hemoglobin; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| **(A) Meta-regression between ARR for 3P-MACE by SGLT-2i therapy and average HbA1c level** | **(B) Meta-regression between ARR for 3P-MACE by GLP-1RA therapy and average HbA1c level** |
|  |  |
| **(C) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in the patients with low HbA1c** | **(D) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE in the patients with high HbA1c** |
|  |  |
| **(E) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and average HbA1c level** | **(F) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and average HbA1c level** |
|  |  |
| **(G) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in the patients with low HbA1c** | **(H) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in the patients with high HbA1c** |
|  |  |

**Supplementary Figure S10. Absolute risk reduction (A~D) and Relative risk reduction (E~H) for 3P-MACE by baseline CVD history.** The coefficient represents the slope of the regression line. R2 indicates the strength of the association of the characteristics. The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. ARR, absolute risk reduction; CI, confidence interval; CVD, cardiovascular disease; GLP-1RA, glucagon-like peptide 1 receptor agonists; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |  |
| --- | --- | --- |
| **(A) Meta-regression between ARR for 3P-MACE by SGLT-2i therapy and proportion of patients with previous CVD** | **(B) Meta-regression between ARR for 3P-MACE by GLP-1RA therapy and proportion of patients with previous CVD** | |
|  |  | |
| **(C) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE without previous CVD** | **(D) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE with previous CVD** | |
|  |  | |
| **(E) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and the proportion of patients with previous CVD** | | **(F) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and the proportion of patients with previous CVD** |
|  | |  |
| **(G) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in the patients without previous CVD** | | **(H) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE in the patients with previous CVD** |
|  | |  |

**Supplementary Figure S11. Absolute risk reduction (A~D) and Relative risk reduction (E~H) for 3P-MACE by pre-existing HF.** The coefficient represents the slope of the regression line. R2 indicates the strength of the association of the characteristics. The diamond indicates the pooled estimates, and the boxes are each study with 95% CI. ARR, absolute risk reduction; CI, confidence interval; GLP-1RA, glucagon-like peptide 1 receptor agonists; HF, heart failure; PYO, person-years of observation; RRR, relative risk reduction; SGLT-2i, sodium-glucose cotransporter-2 inhibitors; 3P-MACE, 3-point major adverse cardiovascular events.

|  |  |
| --- | --- |
| **(A) Meta-regression between ARR for 3P-MACE by SGLT-2i therapy and the proportion of patients with history of HF** | **(B) Meta-regression between ARR for 3P-MACE by GLP-1RA therapy and the proportion of patients with history of HF** |
|  |  |
| **(C) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE without HF history** | **(D) Efficacy of SGLT-2i and GLP-1RA therapy on ARR for 3P-MACE with HF history** |
|  |  |
| **(E) Meta-regression between RRR for 3P-MACE by SGLT-2i therapy and the proportion of patients with history of HF** | **(F) Meta-regression between RRR for 3P-MACE by GLP-1RA therapy and the proportion of patients with history of HF** |
|  |  |
| **(G) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE without HF history** | **(H) Efficacy of SGLT-2i and GLP-1RA therapy on RRR for 3P-MACE with HF history** |
|  |  |

**Supplementary Table S1. GRADE evidence profile for the 3-point major adverse cardiovascular events in each subgroup.** ARR, absolute risk reduction; BMI, body mass index; CVD, cardiovascular disease; eGFR, estimated glomerular filtration ratio; GLP-1RA, glucagon-like peptide-1 receptor agonist; HbA1c, glycated hemoglobin; HF, heart failure; RRR, relative risk reduction; SGLT-2i, sodium–glucose cotransporter-2 inhibitor; 3P-MACE, 3-point major adverse cardiovascular events.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Quality assessment | | | | | | | No of patients | | Effect | | Quality | Importance |
| No of studies | Design | Risk of bias | Inconsistency | Indirectness | Imprecision | Other considerations | Outcome | Control | RRR (95% CI) | ARR (95% CI) |
| Effects on 3P-MACE with overall population by SGLT-2i therapy | | | | | | | | | | | | |
| 6 | randomized trials | not serious | not serious | not serious | not serious | none | 3044/32051 (9.5%) | 2549/25494 (10.0%) | 0.87  (0.81, 0.93) | –0.55  (–0.93, –0.17) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE with overall population by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 2737/27660  (9.9%) | 3037/26352  (11.5%) | 0.85  (0.80, 0.91) | –0.67  (–1.02, –0.32) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with normal eGFR (≥60 mL/min/1.73 m2) by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1928/21322  (9.0%) | 1529/16076  (9.5%) | 0.93  (0.86, 0.99) | –0.17  (–0.34, –0.01) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with normal eGFR (≥60 mL/min/1.73 m2) by GLP-1RA therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | serious | not serious | not serious | none | 1311/15283  (8.6%) | 1535/15320  (10.0%) | 0.83  (0.74, 0.94) | –0.68  (–1.19, –0.17) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with reduced eGFR (<60 mL/min/1.73 m2) by SGLT-2i therapy | | | | | | | | | | | | |
| 6 | randomized trials | not serious | not serious | not serious | not serious | none | 1077/10726  (10.0%) | 1083/9417  (11.5%) | 0.83  (0.74, 0.92) | –0.90  (–1.44, –0.37) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with reduced eGFR (<60 mL/min/1.73 m2) by GLP-1RA therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 636/4682  (13.6%) | 713/4684  (15.2%) | 0.88  (0.74, 1.04) | –0.71  (–1.59, 0.17) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with normoalbuminuria by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1406/17113  (8.2%) | 1185/14074  (8.4%) | 0.94  (0.87, 1.02) | –0.16  (–0.38, 0.06) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with normoalbuminuria by GLP-1RA therapy | | | | | | | | | | | | |
| 1 | randomized trials | not serious | not serious | not serious | very serious | none | 318/4668  (6.8%) | 335/4672  (7.2%) | 0.94  (0.80, 1.09) | –0.19  (–0.63, 0.25) | ⊕⊕◯◯  Low | CRITICAL |
| Effects on 3P-MACE in patients with albuminuria (≥30 mg/g) by SGLT-2i therapy | | | | | | | | | | | | |
| 6 | randomized trials | not serious | serious | not serious | not serious | none | 1621/13588  (11.9%) | 1582/11588  (13.7%) | 0.84  (0.75, 0.94) | –0.89  (–1.71, –0.08) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with albuminuria (≥30 mg/g) by GLP-1RA therapy | | | | | | | | | | | | |
| 1 | randomized trials | not serious | not serious | not serious | very serious | none | 277/1684  (16.4%) | 338/1728  (19.6%) | 0.82  (0.72, 0.99) | –0.82  (–1.57, –0.07) | ⊕⊕◯◯  Low | CRITICAL |
| Effects on 3P-MACE in patients with younger age group by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1199/14033  (8.5%) | 885/9792  (9.0%) | 0.92  (0.85, 1.01) | –0.16  (–0.37, 0.05) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with younger age group by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | serious | not serious | not serious | none | 1108/13445 (8.2%) | 1191/12627 (9.4%) | 0.82  (0.70, 0.95) | –0.73  (–1.32, –0.13) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with older age group by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | serious | not serious | not serious | none | 1499/12726 (11.8%) | 1367/10410 (13.1%) | 0.87  (0.78, 0.97) | –0.54  (–1.04, –0.05) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with older age group by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 1629/14215 (11.5%) | 1846/13725 (13.4%) | 0.86  (0.81, 0.92) | –0.55  (–0.81, –0.28) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in men group by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1979/17809 (11.1%) | 1575/13125 (12.0%) | 0.90  (0.83, 0.97) | –0.36  (–0.65, –0.08) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in men group by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 1921/17409 (11.0%) | 2096/16534 (12.7%) | 0.88  (0.83, 0.94) | –0.50  (–0.77, –0.22) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in women by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 699/8950 (7.8%) | 597/7077 (8.4%) | 0.89  (0.80, 0.99) | –0.22  (–0.45, 0.02) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in women by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 816/10251 (8.0%) | 941/9818 (9.6%) | 0.84  (0.76, 0.92) | –0.40  (–0.65, –0.16) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with low BMI by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1044/10809 (9.7%) | 895/8687 (10.3%) | 0.90  (0.81, 0.99) | –0.32  (–0.70, 0.06) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with low BMI by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | serious | not serious | not serious | none | 1022/10681 (9.6%) | 1156/10196 (11.3%) | 0.80  (0.69, 0.94) | –0.92  (–1.64, –0.20) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with high BMI by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1537/14962 (10.3%) | 1324/11942 (11.1%) | 0.90  (0.82, 0.98) | –0.33  (–0.60, –0.05) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with high BMI by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 1694/16868 (10.0%) | 1865/16046 (11.6%) | 0.86  (0.80, 0.92) | –0.52  (–0.74, –0.30) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with low HbA1c by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 1499/15122 (9.9%) | 1153/10735 (10.7%) | 0.90  (0.82, 0.99) | –0.31  (–0.63, 0.01) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with low HbA1c by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 1158/12476 (9.3%) | 1267/12196 (10.4%) | 0.90  (0.83, 0.98) | –0.31  (–0.56, –0.06) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with high HbA1c by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | serious | not serious | not serious | none | 1198/11885 (10.1%) | 950/8899 (10.7%) | 0.90  (0.82, 1.00) | –0.28  (–0.67, 0.11) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with high HbA1c by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 1570/15121 (10.4%) | 1766/14089 (12.5%) | 0.83  (0.76, 0.90) | –0.79  (–1.26, –0.33) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients without previous CVD by SGLT-2i therapy | | | | | | | | | | | | |
| 3 | randomized trials | not serious | serious | not serious | serious | none | 451/8236 (5.5%) | 519/9065 (5.7%) | 0.91  (0.72, 1.16) | –0.20  (–0.75, 0.34) | ⊕⊕◯◯  Low | CRITICAL |
| Effects on 3P-MACE in patients without previous CVD by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | serious | not serious | not serious | none | 545/8123 (6.7%) | 609/8071 (7.5%) | 0.89  (0.71, 1.12) | –0.21  (–0.73, 0.30) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with previous CVD by SGLT-2i therapy | | | | | | | | | | | | |
| 5 | randomized trials | not serious | not serious | not serious | not serious | none | 2242/18523 (12.1%) | 1755/12585 (13.9%) | 0.89  (0.83, 0.94) | –0.44  (–0.67, –0.21) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with previous CVD by GLP-1RA therapy | | | | | | | | | | | | |
| 7 | randomized trials | not serious | not serious | not serious | not serious | none | 2155/19241 (11.2%) | 2397/18011 (13.3%) | 0.85  (0.80, 0.91) | –0.68  (–0.96, –0.40) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients without HF history by SGLT-2i therapy | | | | | | | | | | | | |
| 4 | randomized trials | not serious | not serious | not serious | not serious | none | 1675/18802 (8.9%) | 1478/15345 (9.6%) | 0.89  (0.83, 0.96) | –0.29  (–0.52, –0.06) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients without HF history by GLP-1RA therapy | | | | | | | | | | | | |
| 3 | randomized trials | not serious | not serious | not serious | serious | none | 1345/13986 (9.6%) | 1525/13952 (10.9%) | 0.88  (0.82, 0.95) | –0.42  (–0.67, –0.17) | ⊕⊕⊕◯  Moderate | CRITICAL |
| Effects on 3P-MACE in patients with HF history by SGLT-2i therapy | | | | | | | | | | | | |
| 4 | randomized trials | not serious | not serious | not serious | not serious | none | 519/3270 (15.9%) | 419/2524 (16.6%) | 0.97  (0.85, 1.10) | –0.14  (–0.77, 0.48) | ⊕⊕⊕⊕  High | CRITICAL |
| Effects on 3P-MACE in patients with HF history by GLP-1RA therapy | | | | | | | | | | | | |
| 3 | randomized trials | not serious | serious | not serious | serious | none | 440/2768 (15.9%) | 502/2848 (17.6%) | 0.88  (0.71, 1.10) | –0.81  (–2.38, 0.76) | ⊕⊕◯◯  Low | CRITICAL |