Supplementary Table 3. Comparison between the global VERIFY study and the Korean data in terms of results, patient baseline characteristics and adverse events

Characteristic	Global study (n=2001) [18]		Korean analysis (n=39)	
	Early combination (n=998)	Initial monotherapy (n=1,003)	Early combination (n=22)	Initial monotherapy (n=17)
Time to initial treatment failure				
HR (95% CI)	0.51 (0.45–0.58)		0.22 (0.06–0.81)	
P value	<0.0001		0.0228	
Second treatment failure				
HR (95% CI)	0.74 (0.63–0.86)		0.00 (0.00–NE)	
P value	<0.0001			
Median time to treatment failure, mo	61.9 (29.9–NR)	36.1 (15.3–NR)	58.5 (30.1–60.0)	45.7 (26.6–59.9)
Baseline characteristics				
Female	545 (54.6)	515 (51.3)	11 (50)	8 (47.1)
Mean age, yr	54.1±9.5	54.6±9.2	52.8±8.6	52.8±10.2
Mean BMI, kg/m²	31.2±4.8	31.0±4.7	26.2±3.0	26.5±2.1
Median duration of T2DM, mo	3.3 (1.0–9.8)	3.4 (0.9–10.4)	3.2 (0.8–8.0)	1.7 (1.1–9.0)
Median weight, kg	85.0 (72.8–97.3)	84.0 (72.0–97.0)	70.5 (63.0–79.0)	69.0 (68.0–73.0)
Mean HbA1c, %	6.7±0.4	6.7±0.5	6.7±0.4	6.8±0.4
Adverse events				
Arthralgia	100 (10.0)	94 (9.4)	1 (4.5)	2 (11.8)
Hypoglycemic events	13 (1.3)	9 (0.9)	0	0
Benign, malignant, and unspecified neoplasms (including cysts and polyps)	62 (6.2)	54 (5.4)	1 (4.5)	2 (11.8)
Pancreatic cancer	3 (0.3)	2 (0.2)[a]	0	0
Prostate cancer	6 (0.6)	0	0	1 (5.9)[b]
Breast cancer	3 (0.3)	1 (0.1)	0	0
Ovarian cyst	1 (0.1)	4 (0.4)	0	0
Pancreatitis and other related events	10 (1.0)	9 (0.9)	0	0
Urinary tract infection	73 (7.3)	71 (7.1)	1 (4.5)	0

Values are presented as median (interquartile range), number (%), or mean±standard deviation. Patients with multiple adverse events under one treatment approach were counted only once in the adverse event category for that treatment approach.
VERIFY, Vildagliptin Efficacy in combination with metfoRmIn For earlY treatment; HR, hazard ratio; CI, confidence interval; NE, not evaluable; NR, not reached; BMI, body mass index; T2DM, type 2 diabetes mellitus; HbA1c, glycosylated hemoglobin.
[a]Fatal outcome for both events, [b]Benign prostatic hyperplasia.