

press release

Novo Nordisk global observational study reveals 2 in 5 people with cardiovascular disease have cardiovascular inflammation, increasing their risk of heart attack and stroke

- The Novo Nordisk study POSEIDON – including 18,904 patients across 18 countries - showed that cardiovascular (CV) inflammation remains highly prevalent among people with cardiovascular disease (CVD), despite current standard of care treatment^{1,2}
- In fact, two in five people with atherosclerotic cardiovascular disease (ASCVD) and chronic kidney disease (CKD), or heart failure, have CV inflammation^{1,2}
- This matters because CV inflammation is an independent risk factor for CV events, such as heart attack and stroke, in people living with CVD, and it shows a significant gap in CV care globally³

Bagsværd, Denmark, 26 May 2026 – Novo Nordisk today presented new results from the landmark POSEIDON real-world evidence study at the 94th European Atherosclerosis Society (EAS) Congress in Athens, Greece. The study showed that CV inflammation remains highly prevalent among people with CVD despite current standard-of-care treatment. The study found that 2 in 5 people with ASCVD and CKD had CV inflammation, which is associated with an increased risk of major CV events^{2,4}.

A second POSEIDON analysis recently published in the *European Journal of Heart Failure* showed that two in five people with heart failure also have CV inflammation¹. In POSEIDON, CV inflammation was measured and defined by high-sensitivity C-reactive protein (hsCRP) levels ≥ 2 mg/L¹. hsCRP is the most commonly used and widely available blood test for measuring CV inflammation⁴⁻⁶.

These findings underscore a significant gap in current CV care. Even when people receive guideline-recommended treatments to control, e.g., cholesterol, blood pressure and blood sugar, inflammation-driven CV risk persists^{3,7}. The POSEIDON study represents one of the largest contemporary global assessments of CV inflammation prevalence in this high-risk population^{1,2}.

"The POSEIDON study provides critical evidence that cardiovascular inflammation represents a significant source of persistent risk in people living with atherosclerotic cardiovascular disease and chronic kidney disease or heart failure, despite receiving standard of care treatment today," said Filip Knop, senior vice president and chief medical officer at Novo Nordisk. "Understanding the scope of cardiovascular inflammatory risk is essential, as we continue our innovation-driven research to develop a first-in-class therapy with the potential to address this critical unmet need."

POSEIDON enrolled 18,904 patients across 18 countries spanning Europe, North America, South America and Asia-Pacific between 2023 and 2025^{1,2}. Within the study, 13,475 patients had ASCVD, of whom 5,757 (42.7%) had CKD, while 11,809 patients had heart failure spanning across all types of heart failure (preserved, mildly reduced or reduced)^{1,2}.

Cardiovascular inflammation plays a central role in the development and progression of ASCVD^{8,9}. Multiple studies have shown that people with CV inflammation face an increased risk of major adverse cardiovascular events, including heart attack, stroke and CV death³⁻⁵. Inflammation also contributes to CKD progression, and CKD itself may promote inflammation, creating a cycle that amplifies CV risk⁹.

It also plays a key role in heart failure, and it is common across all types of heart failure, particularly in people with obesity, kidney disease and other metabolic conditions^{1,10}.

"POSEIDON makes clear that inflammation is not a peripheral concern – it is a shared driver of risk affecting millions of patients worldwide with cardiovascular disease who remain vulnerable despite our best current therapies," said Professor Carolyn S.P. Lam, Senior Consultant, Department of Cardiology, National Heart Centre Singapore; and Professor, Cardiovascular & Metabolic Disorders Signature Research Programme, Duke-NUS Medical School. "What is striking is the consistency of inflammatory signals across such diverse patient populations. That consistency points to a practical way forward – identifying patients most likely to benefit from therapies that directly target inflammation. This reframes how we should think about residual cardiovascular risk, and it underscores the promise of emerging anti-inflammatory therapies to address a real unmet need."

The growing recognition of the role of inflammation in cardiovascular disease is reflected in recent guidelines from the European Society of Cardiology (ESC), the American Heart Association (AHA), and the American College of Cardiology (ACC), which include elevated hsCRP as a risk-modifying biomarker to guide more intensive preventive initiatives^{11,12}.

About POSEIDON

POSEIDON is a large, multinational, cross-sectional observational real-world evidence study designed to evaluate the prevalence and characteristics of high inflammatory risk (defined as hsCRP ≥ 2 mg/L) in patients with ASCVD, with and without CKD and/or heart failure. The study enrolled 18,904 patients across 18 countries between 2023 and 2025. Patients with recent infections, hospitalisations or unplanned medical visits were excluded to ensure that inflammatory markers reflected CV inflammation rather than acute conditions^{1,2}.

About cardiovascular inflammation

Cardiovascular inflammation is increasingly recognised as a key driver of ASCVD and a major contributor to persistent cardiovascular risk in people receiving standard preventive therapies. It also plays a key role in heart failure, and it is common across all types of heart failure (preserved, mildly reduced or reduced), particularly in people with obesity, kidney disease and other metabolic conditions. hsCRP is the most widely available blood test and validated biomarker of CV inflammation. Levels of CV inflammation ≥ 2 mg/L are associated with increased risk of major adverse CV events, including heart attack, stroke and CV death⁴⁻⁶.

Despite standard of care management of traditional risk factors such as cholesterol, blood pressure and blood sugar, many people with ASCVD continue to face elevated CV risk driven in part by persistent inflammation^{2,3,7}. The same is true for people with any type of heart failure, where CV inflammation is associated with more severe symptoms and an increase in the overall CV risk¹.

About Novo Nordisk

Novo Nordisk is a leading global healthcare company founded in 1923 and headquartered in Denmark. Our purpose is to drive change to defeat serious chronic diseases built upon our heritage in diabetes. We do so by pioneering scientific breakthroughs, expanding access to our medicines, and working to prevent and ultimately cure disease. Novo Nordisk employs about 67,900 people in 80 countries and markets its products in around 170 countries. For more information, visit [novonordisk.com](https://www.novonordisk.com), [Facebook](#), [Instagram](#), [X](#), [LinkedIn](#) and [YouTube](#).

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