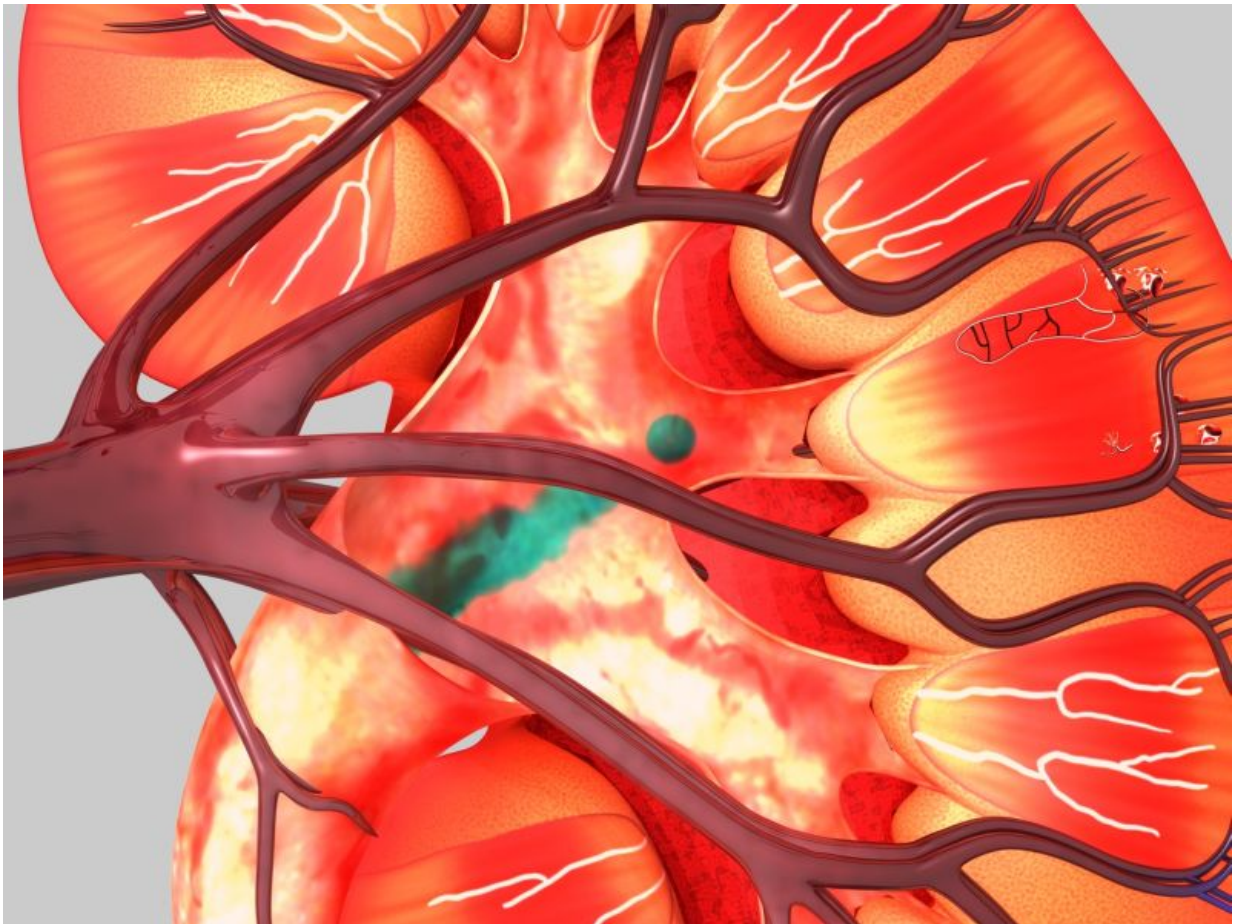


No benefit from aliskiren-tied drops in albuminuria

February 1 2016



(HealthDay)—Reduction in albuminuria with the renin inhibitor

aliskiren may be too small to confer clinical benefit in patients with type 2 diabetes, according to a study published online Jan. 13 in *Diabetes, Obesity and Metabolism*.

Hiddo J.L. Heerspink, Ph.D., from the University of Groningen in the Netherlands, and colleagues assessed whether the extent of albuminuria reduction in the ALTITUDE trial is associated with renal and cardiovascular protection. The ALTITUDE trial involved 8,561 patients with type 2 [diabetes](#) and chronic kidney or [cardiovascular disease](#).

The researchers found that the median drop in albuminuria in the first six months of the trial was 12 percent in the aliskiren arm and 0 percent in the placebo arm. There was a linear association between changes in albuminuria in the first six months and renal and cardiovascular endpoints, with a >30 percent reduction in albuminuria associated with a 62 percent reduction in renal risk and a 25 percent reduction in [cardiovascular risk](#) compared with an increase in albuminuria. For both treatment groups, the association between changes at six months in albuminuria and renal or cardiovascular endpoints was similar (p for interaction > 0.1 for both endpoints).

"This did not translate into renal or cardiovascular protection because the overall reduction in albuminuria in the aliskiren arm was too small and nearly similar to that in the placebo arm," the authors write.

One author reports financial ties to Novartis, which funded the ALTITUDE trial.

More information: [Abstract](#)
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Citation: No benefit from aliskiren-tied drops in albuminuria (2016, February 1) retrieved 18 April 2024 from

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