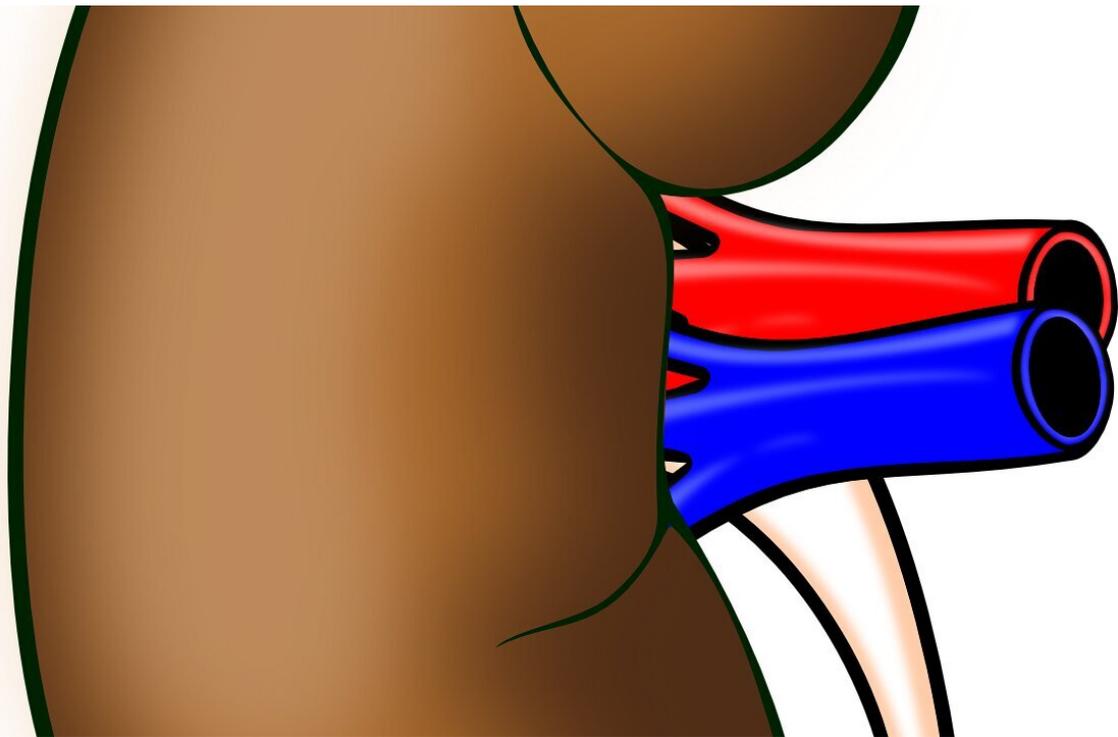


Diabetes drug has kidney-protective effects in patients with advanced kidney disease

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A recent analysis indicates that a drug shown previously to slow kidney disease progression is effective even in patients with advanced disease. The results appear in an upcoming issue of *CJASN*.

The Canagliflozin and Renal Events in Diabetes with Established

Nephropathy Clinical Evaluation (CREDENCE) trial demonstrated that canagliflozin, a diabetes medication within a class called sodium glucose co-transporter 2 (SGLT2) inhibitors, reduced the risk of kidney failure and [cardiovascular events](#) in adults with type 2 diabetes and [chronic kidney disease](#) (CKD). Little is known about the use of SGLT2 inhibitors in patients with advanced CKD, however.

To investigate, George Bakris, MD (University of Chicago Medicine) and his colleagues conducted a post hoc analysis of CREDENCE data pertaining to the 174 patients who had advanced CKD, or an estimated [glomerular filtration rate](#) (eGFR) below 30 mL/min/1.73 m² at the start of the trial.

The researchers found that canagliflozin slowed CKD progression compared with placebo, with a 66% difference (average eGFR declines of -1.30 vs. -3.83 mL/min/1.73 m² per year). Also, canagliflozin's effects on kidney, cardiovascular, and mortality outcomes were consistent with those seen for individuals with less advanced CKD.

"Until recently, there were limited data regarding the use of SGLT2 inhibitors in patients with compromised [kidney function](#), and there were few treatment options for this patient population who are at a high risk for developing kidney failure," said Dr. Bakris. "This research suggests that canagliflozin is a safe treatment option for this patient population that can help to slow the progression of [kidney](#) disease."

More information: "Effects of Canagliflozin in Patients with Baseline eGFR

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