



METABOLIC DISEASES EXPERTS

# 10-WEEK, BUT NOT 7-WEEK, DAPAGLIFLOZIN TREATMENT IMPROVES SEVERE RENAL IMPAIRMENT IN UNI-NEPHRECTOMIZED SDT FATTY RAT, A 10-WEEK MODEL OF ADVANCED RENAL COMPLICATIONS AND **GLOMERULAR FILTRATION RATE DECLINE.**

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#### BACKGROUND

Sodium glucose cotransporter 2 inhibition (SGLT2i) represents a promising new class of glucose lowering drugs but may not be recommended in type 2 diabetic patients with severe renal impairment. Here we evaluated the effects of dapagliflozin (DAPA) treatment in uni-nephrectomized Spontaneously Diabetic Torii (SDT) fatty rat. This novel hypertensive, obese, type 2 diabetic model, develops advanced renal complications and >50% glomerular filtration rate (GFR) decline within 10 weeks.

## **METHODS**

Male, 6-week old SDT fatty rats underwent unilateral nephrectomy (Unx). After a 1-week recovery, rats were put on a salt-supplemented diet (Purina 5008 chow diet and drinking water supplemented with 0.3% salt) for 10 weeks. Rats were treated without or with DAPA 1mg/kg/day in the chow diet either upon diet start (10week treatment) or after 3 weeks of diet to enhance kidney complications (7-week treatment). A group of control/sham operated rats was included to evaluate kidney complications induced by nephrectomy and salt supplementation.

### RESULTS

Data are presented as mean  $\pm$  SEM. Statistical analysis was performed using either an unpaired, 2 tailed Student t-test, Mann-Whitney test or a 2-way ANOVA + Bonferroni post-test. A p<0.05 was considered significant.



3. Dapagliflozin treatment for 7 weeks does not change kidney histopathology scoring in Unx SDT fatty rat under 0.3% salt.



scoring

ED1

/50 gloms

Sirius red

3

2

5. Dapagliflozin treatment for 10 weeks improves kidney complications in Unx SDT fatty rat under 0.3% salt.



HbA1c (A), fed glycemia (B), albuminuria (C), 24-hour creatinine clearance (D) and glomerular filtration rate (E) measured after FITC-inulin injection in Sham, Unx Unx+dapagliflozin rats after 7 weeks of and treatment. \*p<0.05, \*\*p<0.01 and \*\*\*p<0.001 Unx vs. Sham, **#p<0.05** and **##p<0.01** Unx vs. Unx+dapa.

2. Dapagliflozin treatment for 7 weeks does not

4. Dapagliflozin treatment for 10 weeks improves glycemic control but not GFR in Unx SDT fatty rat under 0.3% salt.



Histopathological features (PAS, Collagen III and ED1) staining in Sham, Unx rats and Unx+dapagliflozin rats after 10 weeks of treatment.

6. Dapagliflozin treatment for 10 weeks improves kidney histopathology scoring in Unx SDT fatty rat under 0.3% salt.



#### alter kidney complications in Unx SDT fatty rat under 0.3% salt.



Histopathological features (PAS, Sirius Red and ED1) staining in Sham, Unx and Unx+dapagliflozin rats after 7 weeks of treatment.

HbA1c (A), fed glycemia (B) and glomerular filtration rate (C) measured after FITC-inulin injection in Unx rats and Unx+dapagliflozin rats after 10 weeks of treatment. ##p<0.01 vs. Unx.

PAS (A), fibrosis (B) and ED1 scoring (C) in Unx and Unx+dapagliflozin rats after 10 weeks of treatment. #p<0.05, ##p<0.01 and ###p<0.001 vs. Unx.

#### **CONCLUSION**

•Dapagliflozin for 10 weeks, but not 7 weeks, significantly prevents advanced renal complications in Unx SDT fatty rats.

•Long-term SGLT2i may be beneficial against kidney complications in the context of type 2 diabetes.

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