Liraglutide, sitagliptin have no effect on renal hemodynamics

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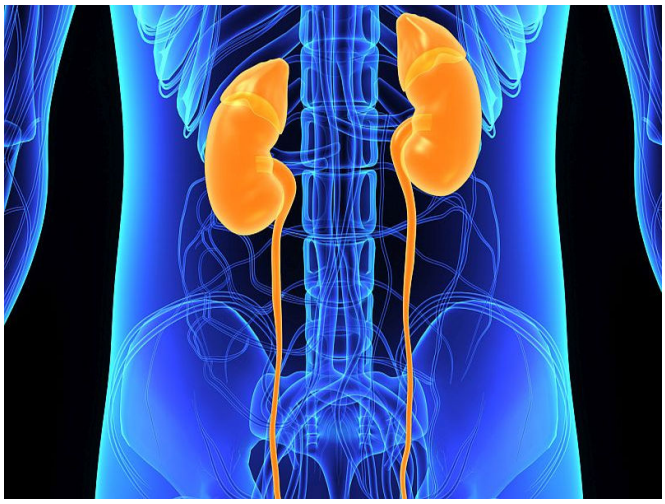

(HealthDay)—In insulin-naive patients with type 2 diabetes, 12 weeks of treatment with liraglutide or sitagliptin has no effect on renal hemodynamics, according to a study published online Sept. 1 in *Diabetes Care*.

Lennart Tonneijck, M.D., from the VU University Medical Center in Amsterdam, and colleagues conducted a 12-week randomized, double-blind trial involving 55 insulin-naive patients with type 2 diabetes. Patients were randomized to receive sitaglipin, liraglutide, or matching placebos.

The researchers found that glomerular filtration rate was not affected by sitagliptin or liraglutide versus placebo at week 12 (P = 0.17 and 0.46, respectively). There was a modest reduction in estimated glomerular hydraulic pressure with sitagliptin (P = 0.043). For both treatments there were no changes in effective renal plasma flow, other intrarenal hemodynamic variables, renal damage markers, and plasma renin concentration. Reductions in glycated hemoglobin were seen for both agents. At week two, sitagliptin increased fractional excretions of sodium and urea.

"Twelve-week treatment with sitagliptin or liraglutide does not affect measured renal hemodynamics," the authors write. "No sustained changes in tubular functions or alteration in renal damage markers were observed."

The VU University Medical Center received grants from pharmaceutical companies, including Novo Nordisk, which provided the liraglutide and liraglutide-placebo pens.

More information: Full Text (subscription or payment may be required)