Documents

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Hypoglycemic medications in type 2 diabetes and renal protection: A new therapeutic area? [Médicaments hypoglycémiants dans le diabète de type 2 et néphroprotection : un nouvel axe thérapeutique ?]
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Abstract
Diabetic nephropathy is currently the leading cause of chronic end stage renal disease with its clinical consequences. Its prevention implies a multipluridisciplinary management based on a strict control of blood glucose from the onset of diabetes, and blood pressure with a dominant place for ACE-i or sartans. Recent clinical trials have demonstrated that metformin but more importantly new classes of antihyperglycemic agents (DDP-4 inhibitors, GLP-1 receptor agonists and SGLT-2 inhibitors) had in addition to their antihyperglycemic effect a nephroprotective action on renal function and/or albuminuria. Therefore, according to scientific societies, in the presence of renal failure, SGLT-2 inhibitors and, if contra-indicated, GLP-1 receptor agonists should be a first choice in type 2 diabetes after failure of metformin in the context of an individualized approach. © 2019

Author Keywords
Gliptins; GLP-1 receptor agonists; Nephropathy; Nephroprotection; SGLT-2 inhibitors; Type 2 diabetes

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antidiabetic agent, dipeptidyl peptidase IV inhibitor, glucagon like peptide 1 receptor agonist, metformin, sodium glucose cotransporter 2 inhibitor; albuminuria, antidiabetic activity, Article, drug choice, kidney failure, kidney function, non insulin dependent diabetes mellitus, renal protection

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