# ACT Module 5

## Renal benefits of SGLT-2 inhibitors in diabetes

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**1. In the proximal tubule of the kidney, SGLT-2 inhibitors limit the reabsorption of:**

☐ **A** Glucose ☐ **B** Sodium ☐ **C** A and B

**2. Which statement is true? SGLT-2 inhibitors:**

☐ **A** Promote afferent arteriole vasoconstriction ☐ **B** Act on efferent arteriole vasodilatation

**3. The renal protective benefits of SGLT-2 inhibitors are dependent on changes in:**

☐ **A** $HbA_{1c}$
☐ **B** Weight
☐ **C** Blood pressure
☐ **D** All of the above
☐ **E** None of the above

**4. Which statement is true? With declining GFR:**

☐ **A** $HbA_{1c}$ lowering efficacy of empagliflozin is also substantially reduced
☐ **B** There is no reduction in the blood pressure lowering efficacy of empagliflozin
☐ **C** A and B

**5. In EMPA-REG OUTCOME, empagliflozin treatment achieved a __% reduction of heart failure in actively treated patients.**

☐ **A** 23% ☐ **B** 35% ☐ **C** 43%

**6. In EMPA-REG OUTCOME, empagliflozin treatment achieved a __% RRR for the composite renal outcome.**

☐ **A** 35% ☐ **B** 39% ☐ **C** 43%

**7. In EMPA-REG OUTCOME, a noticeable stabilisation of the GFR is observed with empagliflozin compared to a decline in GFR observed in the placebo group across patients with normo-, micro- or macroalbuminuria.**

☐ **A** True ☐ **B** False

**8. The benefit of an SGLT-2 inhibitor on incident or worsening nephropathy is independent of:**

☐ **A** Changes in $HbA_{1c}$ ☐ **B** Baseline $HbA_{1c}$ ☐ **C** A and B

**9. In the CANVAS Program, a highly statistically significant __% RRR in the composite renal outcome favoured canagliflozin versus placebo.**

☐ **A** 27% ☐ **B** 33% ☐ **C** 40%

**10. In the CANVAS Program, there was no increased signal of AKI, and AKI benefit favoured the use of canagliflozin.**

☐ **A** True ☐ **B** False

**11. Which of the following SGLT-2 inhibitor studies is the largest, longest, and broadest in terms of enrolled populations?**

☐ **A** EMPA-REG OUTCOME ☐ **B** CANVAS Program ☐ **C** DECLARE-TIMI 58

**12. In DECLARE-TIMI 58, a __% RRR for the composite renal outcome favoured dapagliflozin.**

☐ **A** 24% ☐ **B** 32% ☐ **C** 40%

**13. Key DECLARE-TIMI 58 outcomes by baseline renal function include a 14% reduction in eGFR and a 40% RRR for ESRD or renal or cardiovascular death.**

☐ **A** True ☐ **B** False

**14. Which statement is false? In terms of secondary prevention of renal events in established cardiovascular disease, meta-analyses of SGLT-2 inhibitor trials indicate:**

☐ **A** Almost identical individual benefits of each agent ☐ **B** A cumulative overall RRR of 14%

**15. The CREDENCE trial of canagliflozin in diabetic kidney disease was stopped early on the achievement of prespecified efficacy criteria that included the primary composite of ESRD, doubling of serum creatinine, renal or cardiovascular death, on top of standard of care.**

☐ **A** True ☐ **B** False



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