

# Metformin tied to better clinical outcomes in CKD, CHF, CLD

January 4 2017

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(HealthDay)—For patients with chronic kidney disease (CKD),

congestive heart failure (CHF), or chronic liver disease (CLD) with hepatic impairment, metformin use is associated with improvements in clinical outcomes, according to a review published online Jan. 3 in the *Annals of Internal Medicine*.

Matthew J. Crowley, M.D., from the Durham Veterans Affairs Medical Center and Duke University School of Medicine in North Carolina, and colleagues synthesized data addressing outcomes of [metformin](#) use in patients with type 2 diabetes and moderate to severe CKD, CHF, or CLD with hepatic impairment. Data were included from studies that compared diabetes regimens that included metformin with those that did not, and reported all-cause mortality, major adverse cardiovascular events, and other outcomes of interest.

The researchers found that metformin use correlated with reduced all-cause mortality in patients with CKD, CHF, or CLD with hepatic involvement on the basis of quantitative and qualitative syntheses involving 17 observational studies. In patients with CKD or CHF, metformin use correlated with fewer heart failure readmissions.

"Metformin use in patients with moderate CKD, CHF, or CLD with hepatic impairment is associated with improvements in key [clinical outcomes](#)," the authors write. "Our findings support the recent changes in metformin labeling."

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Citation: Metformin tied to better clinical outcomes in CKD, CHF, CLD (2017, January 4)

retrieved 15 May 2023 from <https://medicalxpress.com/news/2017-01-metformin-tied-clinical-outcomes-ckd.html>

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