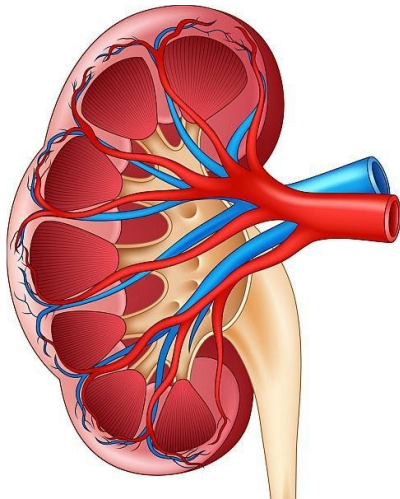


# More rapid decline in kidney function for diagnosed diabetes

7 June 2018



[systolic blood pressure](#)  $\geq 140$  mm Hg, insulin use, and higher hemoglobin A1c.

"Among people with diagnosed diabetes, steeper declines were seen in those with modifiable risk factors, including hypertension and glycemic control, suggesting areas for continued targeting in kidney disease prevention," the authors write.

Reagents for the 1,5-anhydroglucitol assays were donated by the GlycoMark Corp.

**More information:** [Abstract/Full Text](#) ([subscription or payment may be required](#))

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(HealthDay)—Individuals with diagnosed diabetes have more rapid kidney function decline than those without diabetes, according to a study published online June 1 in *Diabetes Care*.

Bethany Warren, from Johns Hopkins Bloomberg School of Public Health in Baltimore, and colleagues classified 15,517 participants in the community-based Atherosclerosis Risk in Communities study by diabetes status at baseline. Estimated [glomerular filtration rate](#) (eGFR) trajectories were quantified at four visits over 26 years.

The researchers found that over the full study period, the adjusted mean eGFR decline was  $\approx 1.4$  mL/min/1.73 m<sup>2</sup>/year among participants without diabetes,  $\approx 1.8$  mL/min/1.73 m<sup>2</sup>/year among those with [undiagnosed diabetes](#), and  $\approx 2.5$  mL/min/1.73 m<sup>2</sup>/year for those with diagnosed diabetes. Risk factors for steeper eGFR decline among participants with diagnosed diabetes included African-American race, *APOL1* high-risk genotype,

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