



The Medical **Bulletin**

In Nephrology

The SGLT2 inhibitor class of glucose-lowering agents has recently shown beneficial effects to reduce the onset and progression of renal complications in people with and without diabetes.

Randomized clinical trials and 'real world' observational studies, mostly involving type 2 diabetes patients, have noted that use of an SGLT2 inhibitor can slow the decline in glomerular filtration rate (GFR), reduce the onset of microalbuminuria and slow or reverse the progression of proteinuria.

Frontline clinicians should initiate SGLT-2 inhibitors for patients with type 2 diabetes and diabetic kidney disease who have an eGFR of at least 30 mL/min/1.73 m²

Deferring initiation of SGLT-2 inhibitors to a specialist (a nephrologist or endocrinologist) will result in a faster progression of diabetic kidney disease irrespective of glycemic control, and it is crucial to initiate these medications as early as possible.

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