Renal cell-type associated therapeutic effects of semaglutide in a mouse model of hypertension accelerated diabetic kidney disease

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Background & Aim

Obesity, hyperglycemia and hypertension are critical risk factors for development of diabetic kidney disease (DKD). While emerging evidence suggests that glucagon-like peptide-1 receptor (GLP-1R) agonists improve cardiovascular and renal outcomes in type 2 diabetes patients, their mode of action is presently unclear. Using paired bulk and single-nucleus RNA sequencing (RNAseq), we profiled renal transcriptome signatures of the long-acting GLP-1R agonist semaglutide alone and in combination with the ACE inhibitor lisinopril in a model of hypertensionaccelerated, advanced DKD facilitated by adenoassociated virus-mediated renin overexpression (ReninAAV) in uninephrectomized (UNx) female db/db mice.

Methods

Seven weeks after ReninAAV administration and six weeks post-UNx, ReninAAV UNx *db/db* mice were administered (q.d.) vehicle, semaglutide (30 nmol/kg, s.c.) or semaglutide (30 nmol/kg, s.c.) + lisinopril (30 mg/kg, p.o.) for 11 weeks. Endpoints included blood pressure, urine biochemistry, kidney histopathology as well as paired bulk and single-nucleus RNA seq. Cell type deconvolution was performed by referencing expression of treatment-affected genes across all major kidney cell types using single nuclei RNAseq.

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Study outline

Group



)	Animal	Gender	Number of animals	Treatment	Administration route	Dosing Frequency	Dosing volume	Dosing concentration
	ReninAAV Unx db/db	Female	15	Vehicle	SC	QD	5 ml/kg	-
	ReninAAV Unx db/db	Female	15	Semaglutide	SC	QD	5 ml/kg	30 nmol/kg
	ReninAAV Unx db/db	Female	14	Semaglutide + Lisinopril	SC + PO	QD	5 ml/kg	30 nmol/kg + 30 mg/kg

Reduced glomerulosclerosis



GS2 (<50%)

• GS3 (<75%)

Figure 5. Semaglutide improves glomerulosclerosis severity in *db/db* UNx-ReninAAV mice

(A) Automated detection of PAS-positive glomeruli and scoring of glomerulosclerosis by Gubra Histopathological Objective Scoring Technique (GHOST) deep learning-based image analysis. A scoring-based colour code was used to visualize sclerosis severity (GS0-GS4) in affected glomeruli. Left panel: Representative kidney image from a vehicle-treated *db/db* UNx-ReninAAV mice with visualization of scoring-based color code of individual glomeruli. Right panels: Normal glomerus (top, GS0) vs. global glomerulosclerosis (bottom, GS4). (B) Group-wise distribution (fraction %) of glomerulosclerosis scores. (C) Glomerulosclerosis index. ***p<0.001 vs *db/db* UNx-ReninAAV control mice (Dunnett's test one-factor linear model with interaction).



Renal cell-type associated transcriptome changes





Improved metabolic parameters





body weight and biochemical parameters in *db/db* UNx-**ReninAAV mice**

(A) Body weight (first dose day 0). (B) Fed blood glucose. (C) Terminal HbA1c. *p<0.05, **p<0.01 ***p<0.001 compared to vehicledosed *db/db* UNx-ReninAAV mice (Dunnett's test one-factor/twofactor linear model with interaction).





Figure 3: Semaglutide markedly improves hypertension and albuminuria in *db/db* UNx-ReninAAV mice (A) Mean arterial blood pressure measured in treatment week 1 and 10. (B) Albumin-to-creatinine ratio (terminal spot urine samples). ***p<0.001 vs vehicle-dosed db/db UNx-ReninAAV mice. ##p<0.01, ###p<0.001 vs. semaglutide (Dunnett's test two-factor linear model with interaction).

Conclusion

Semaglutide alone and in combination with lisinopril:

- Reduces body weight, blood glucose and HbA1c
- Markedly improves hypertension and albuminuria
- + Markedly reduces glomerulosclerosis
- + Improves renal transcriptome signatures

These findings support nephroprotective effects of semaglutide in DKD, highlighting the applicability of the db/db UNx-ReninAAV mouse model in preclinical drug development.

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