

Cardiorenal protective 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 the development of diabetic cardiovascular disease (CVD) and diabetic kidney disease (DKD).

Emerging evidence suggests that glucagon-like peptide-1 receptor agonists (GLP-1RAs) improve cardiovascular and renal outcomes in type 2 diabetic patients.

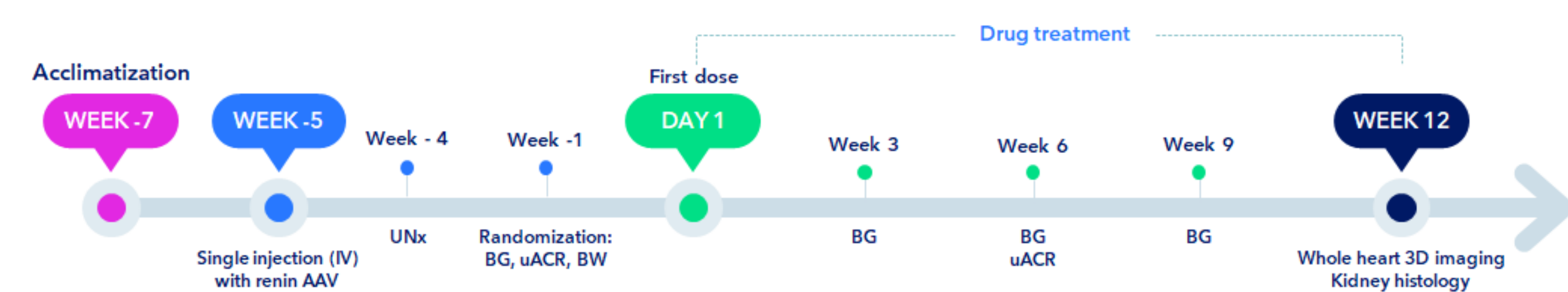
Here, we characterized the cardiovascular effects of semaglutide, a long-acting GLP-1RA, in a mouse model of hypertension-accelerated advanced DKD, facilitated by adeno-associated virus-mediated renin overexpression (ReninAAV) in uninephrectomized (UNx) female diabetic *db/db* mice.

Methods

See study outline. Female diabetic *db/db* mice (12 weeks old) received a single IV dose of renin-encoding AAV by study week -5 and underwent unilateral nephrectomy at study week -4. *db/db* UNx-ReninAAV mice were randomized into treatment groups based on body weight, urinary albumin-to-creatinine ratio (uACR) and fed blood glucose (BG) levels. *db/db* UNx-ReninAAV mice were administered (SC) vehicle or semaglutide (20 nmol/kg) once daily and terminated after 12 weeks of treatment. Vehicle-dosed *db+* mice served as normal controls. Endpoints included heart weight, uACR, whole-heart 3D imaging (Fast Green stain, Masson's trichrome collagen labelling dye) and kidney histopathology.

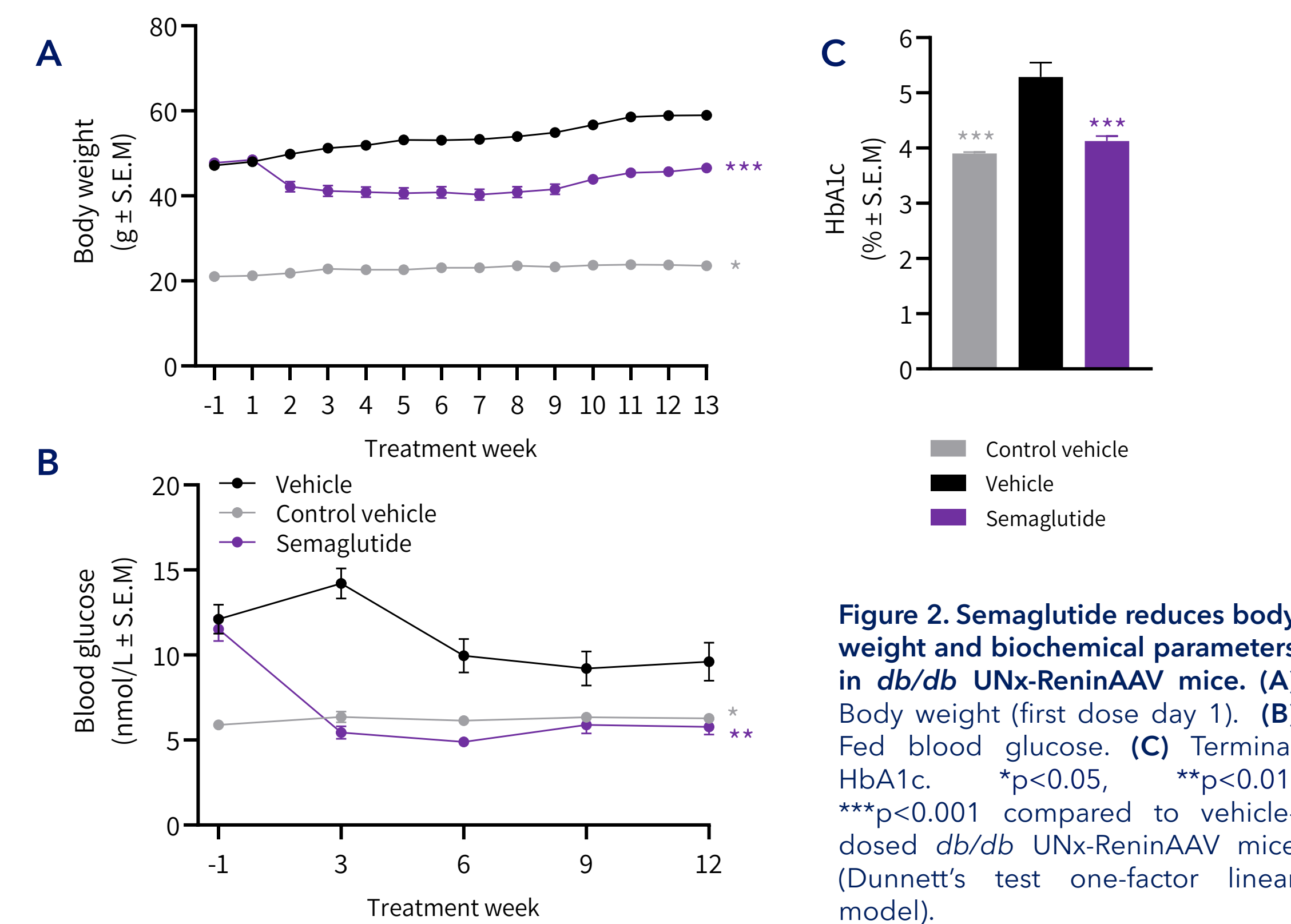
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1 Study outline

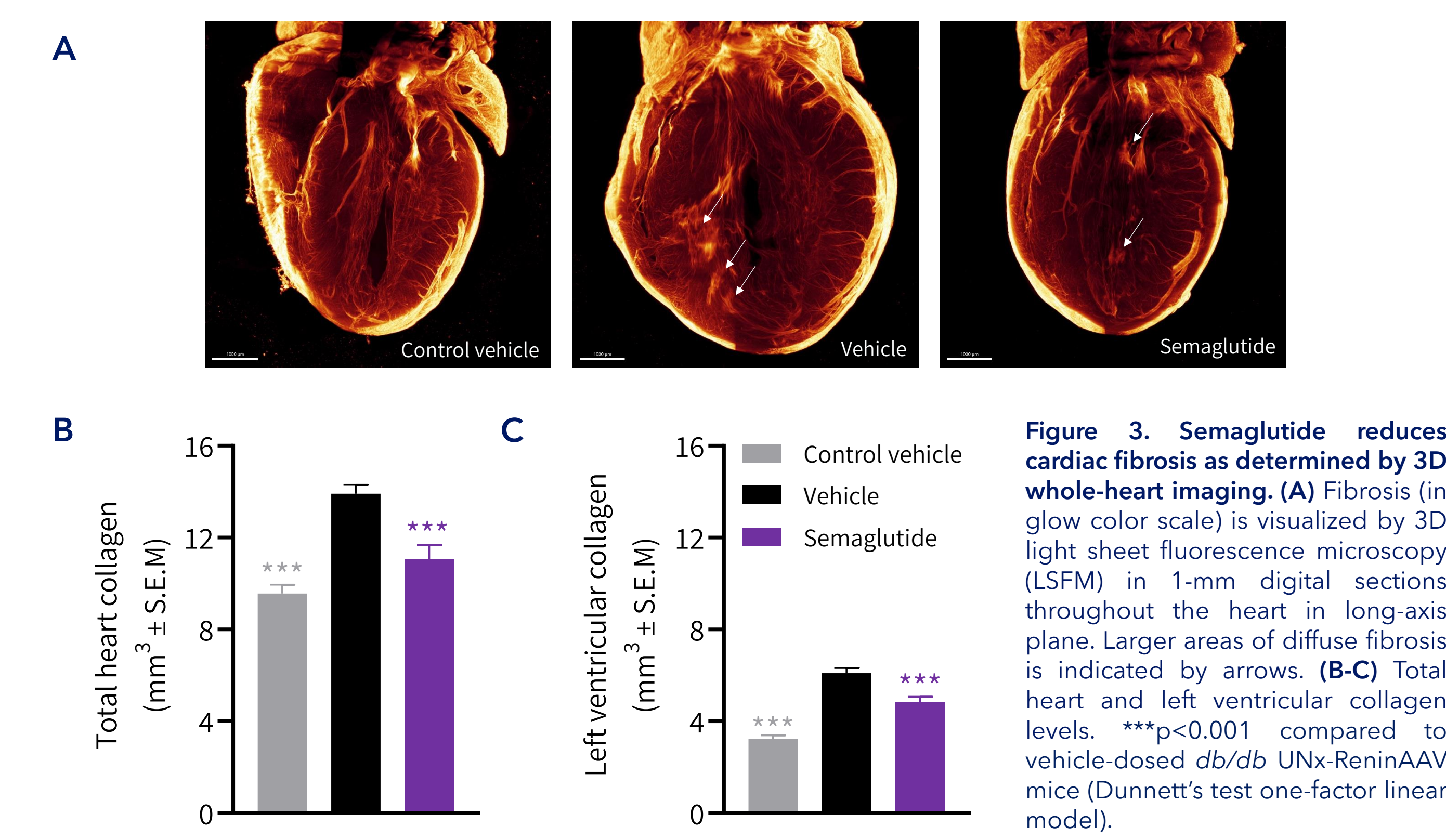


Group	Animal	Gender	Number of animals	Treatment	Administration route	Dosing Frequency	Dosing volume	Dosing concentration
1	Db/+	Female	9	Vehicle	SC	QD	5 ml/kg	-
2	ReninAAV UNx db/db	Female	17	Vehicle	SC	QD	5 ml/kg	-
3	ReninAAV UNx db/db	Female	13	Semaglutide	SC	QD	5 ml/kg	20 nmol/kg

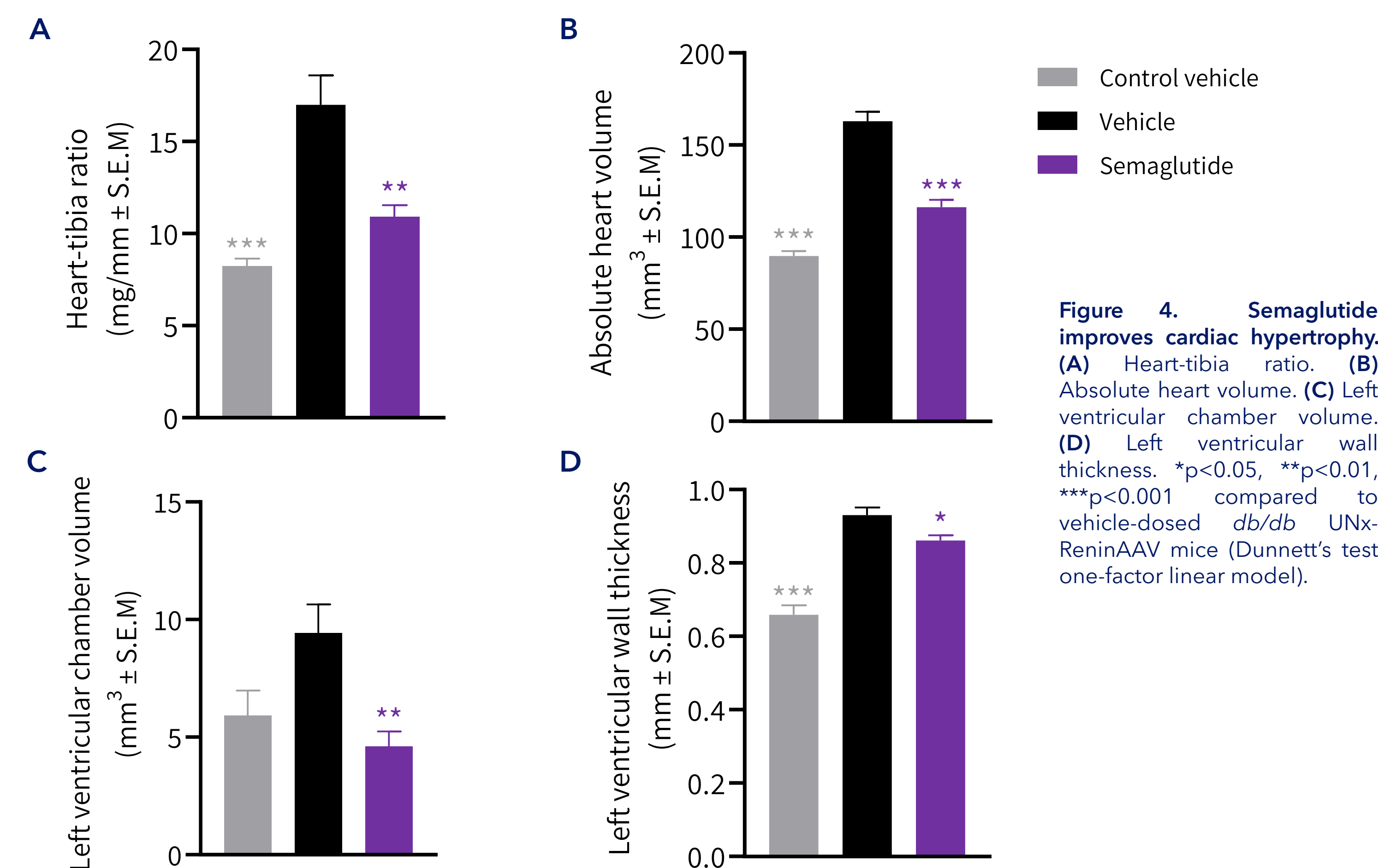
2 Semaglutide improves metabolic endpoints



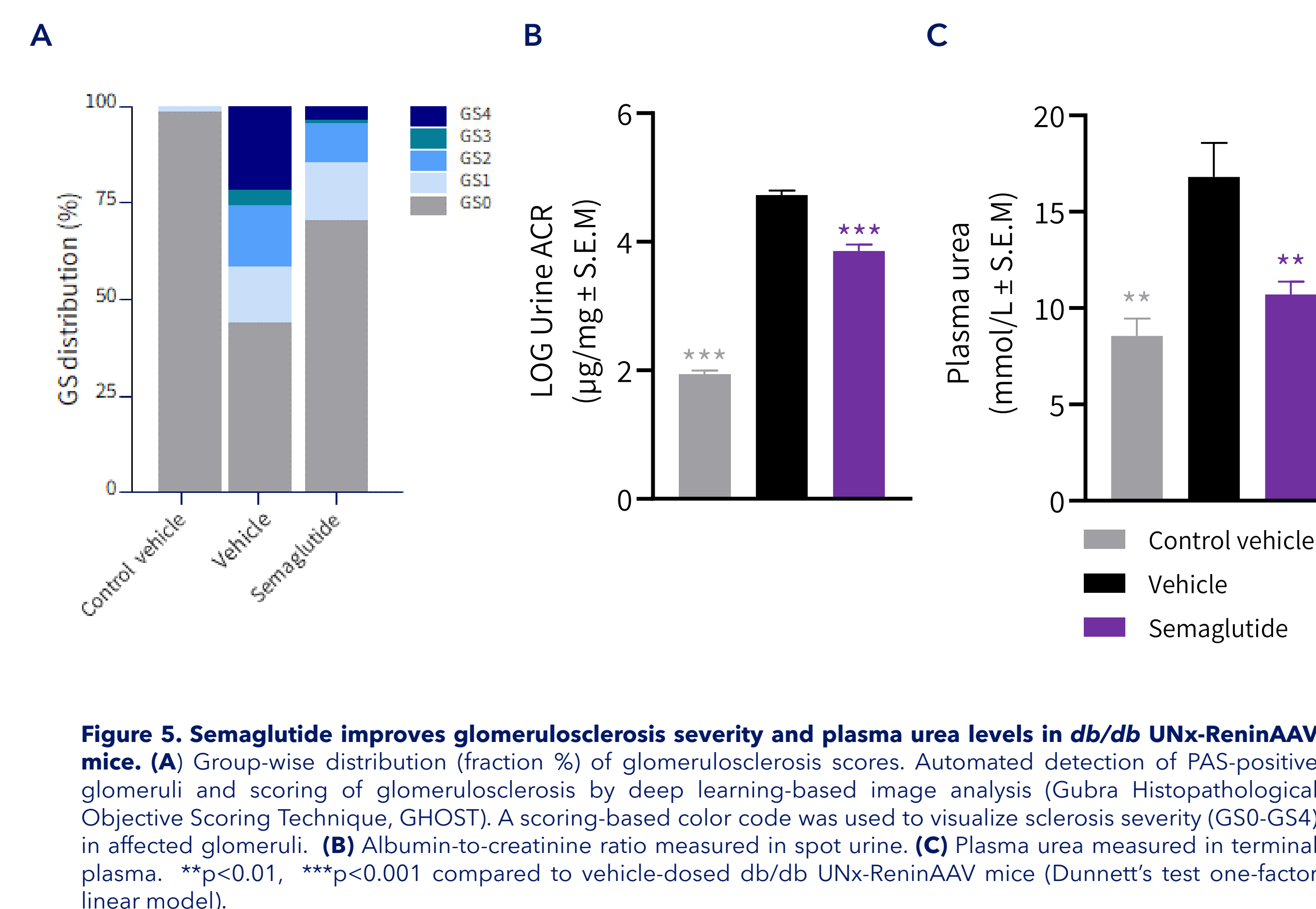
3 Semaglutide reduces whole-heart fibrosis



4 Semaglutide reduce cardiac hypertrophy



5 Semaglutide reduces kidney injury



Conclusion

- + *db/db* ReninAAV UNx mice present with cardiac fibrosis, concentric cardiac hypertrophy as well as glomerulosclerosis and albuminuria
- + Semaglutide reduces body weight, blood glucose and HbA1c
- + Semaglutide reduces cardiac fibrosis
- + Semaglutide improves cardiac hypertrophy and left ventricular dilation
- + Semaglutide improves glomerulosclerosis

These findings support cardiorenal protective effects of semaglutide in CVD and DKD and highlights the applicability of the *db/db* UNx-ReninAAV mouse model in preclinical drug development.

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