

## Background

- Essential hypertension is a major risk factor for chronic kidney disease.
- There is no conclusive evidence that lowering blood pressure alone significantly improves renal function.
- Based on animal studies on hypertensive models, angiotensin-II receptor blockers (ARBs) are proposed to have a protective renal effect that is independent of blood pressure lowering.
- Clinical evidence of the reno-protective effect of ARBs in hypertensive patients is lacking.
- Some preclinical evidence exists. However, no structured assessment for the preclinical evidence has been done to serve as preclinical baseline hypothesis.

## Study Objective

- The objective of this study was to structurally assess the evidence from preclinical murine models on the reno-protective effect of ARBs in hypertensive population to provide a high quality pre-clinical baseline for future investigations.

## Methods

### Search Strategy:

- Systematic review following PRISMA checklist for quasi-experimental murine studies.
- Four databases were searched including; PubMed, EMBASE, Scopus and ScienceDirect.
- Keywords words include; hypertension AND (rats or mice) AND (renal or kidney) AND ARBs (with synonyms and names of single agents) and NOT patients
- Search was limited to English articles published between 2000 and 2020.

### Study Selection:

- Included articles were studies conducted on hypertensive rats or mice, reporting means and standard error of mean (SEM), with moderate or high quality and reporting any of the predetermined outcomes.
- Excluded articles were studies with low quality, studies with designs other than quasi-experimental designs or studies not following any point in the inclusion criteria
- Deduplication was done in duplicate, screening was done as single screening then a sample of 100 articles were double screened to insure consistency

### Quality Assessment

- The quality was assessed using Joanna Briggs Institute criteria for quasi-experimental studies.
- Two reviewers (SA and MH) independently assessed the quality of the included studies, and the decision was made with an agreement between both reviewers.

### Outcomes of interest

- The study looked into four main outcomes reported as means and SEM, including creatinine clearance, proteinuria, albuminuria and/or BUN

### Data Extraction

- Data extraction was performed by the two reviewers independently.
- Extraction was mainly for hypertensive animal model, baseline characteristics, intervention and comparators, reduction in blood pressure (if reported) and exclusion of diabetic models.

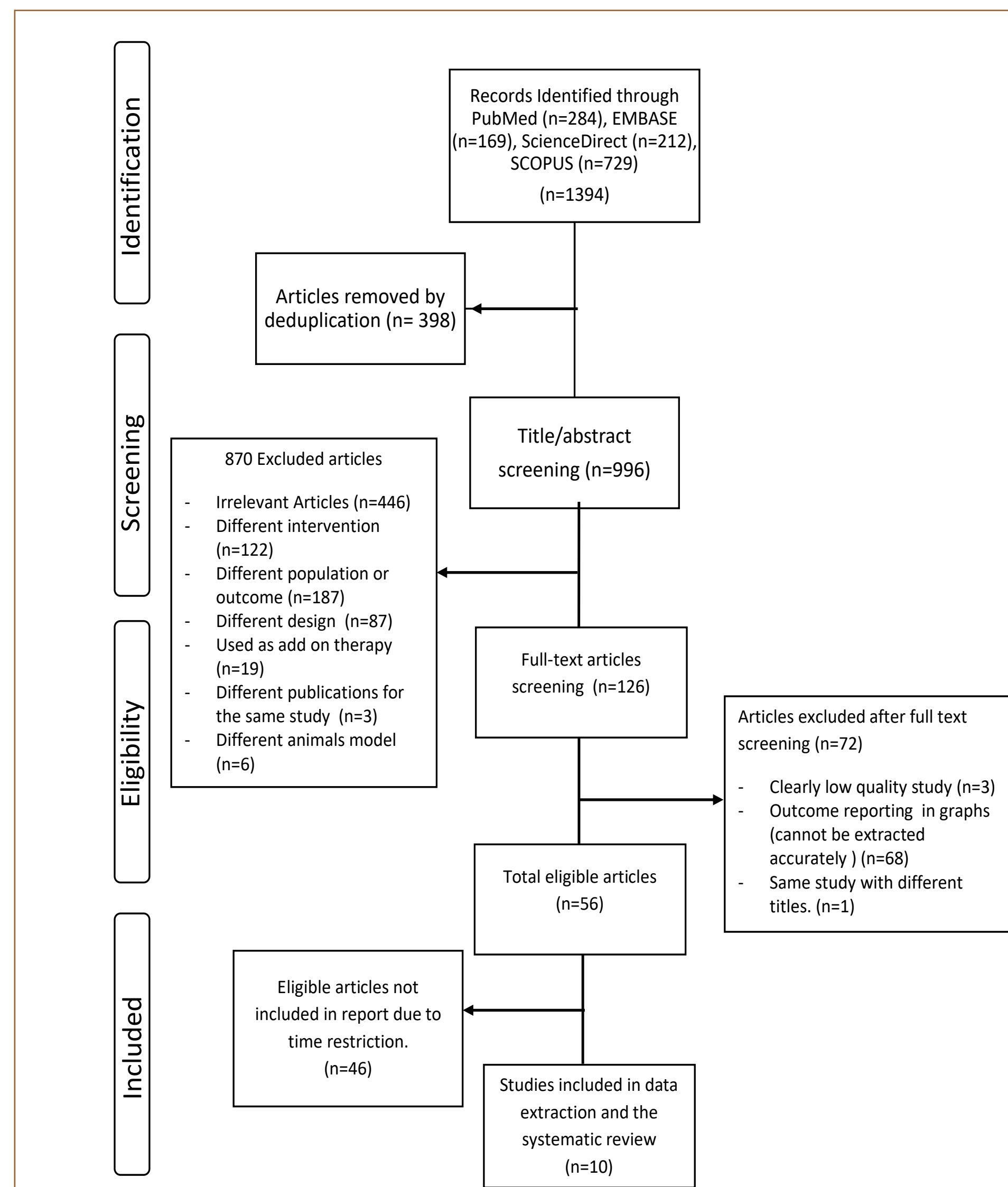


Figure 1. The flow chart for screening and inclusion

Yes	No	Unclear	High	Moderate	Low
+	-	?	↑	↔	↓
Clarity of the cause and effect					
Similarity in participants characteristics					
Similarity in care/treatment between groups					
Presence of control group					
Multiple measurement of outcome Pre and post-exposure					
Completeness and similarity of follow up between groups					
Unity in methods for outcome measurement between groups					
Reliability of outcome measuring method					
Appropriateness of statistical analysis used					
Decision on overall quality of the study					
Decision on including the study					

Study	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Afzal, S., et al. (2016)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Alarcon Arias, S. C., et al. (2015)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Ameer, O. Z., et al. (2016)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Aritomi, S., et al. (2010)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Aritomi, S., et al. (2013)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Baummann, M., et al. (2007)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Bertram, D., et al. (2002)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Čertíková Chábová, V., et al. (2014)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Chaykovska, L., et al. (2013)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
De Cavanagh, E. M. V., et al. (2010)	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

Figure 2. JBI quality assessment for included studies

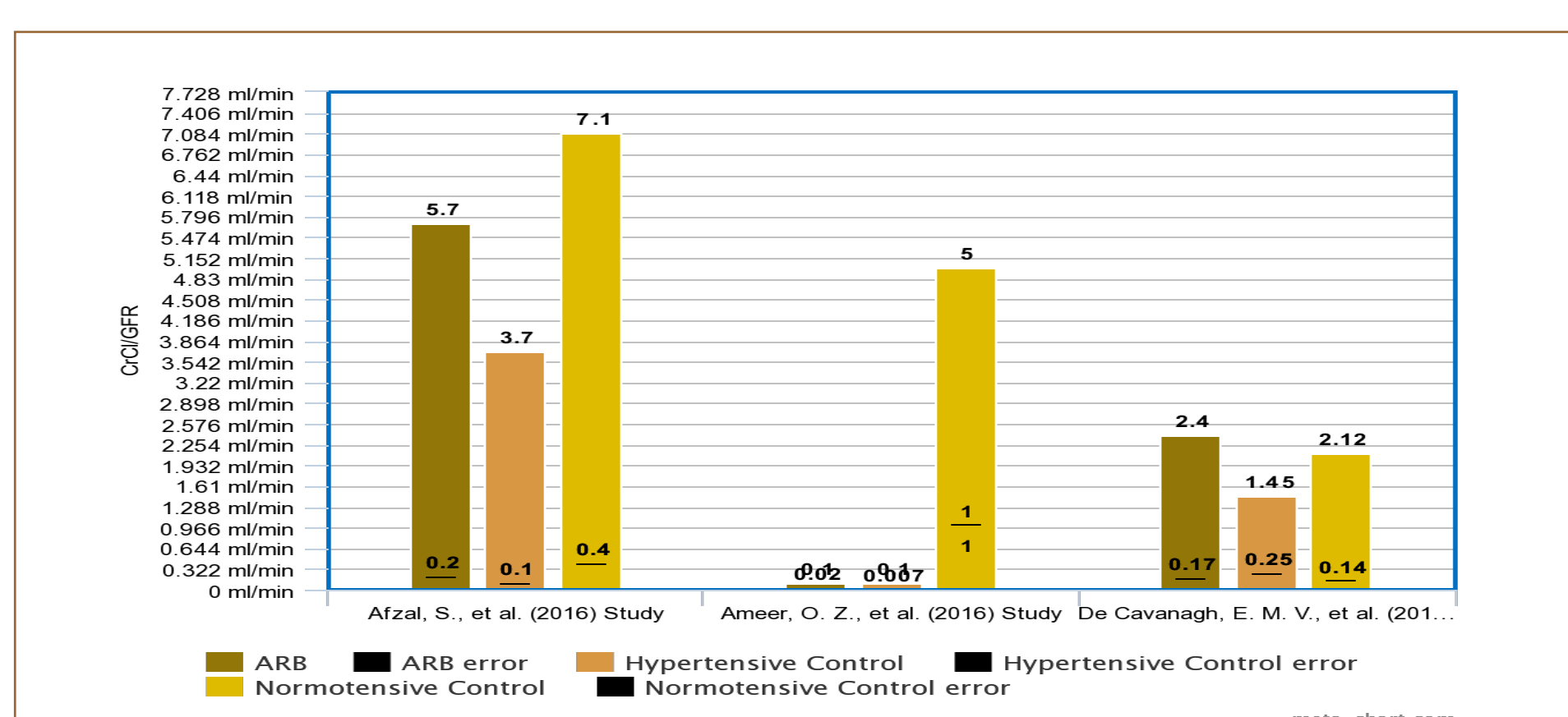


Figure 3. CrCl of ARBs vs HTN and normotensive control

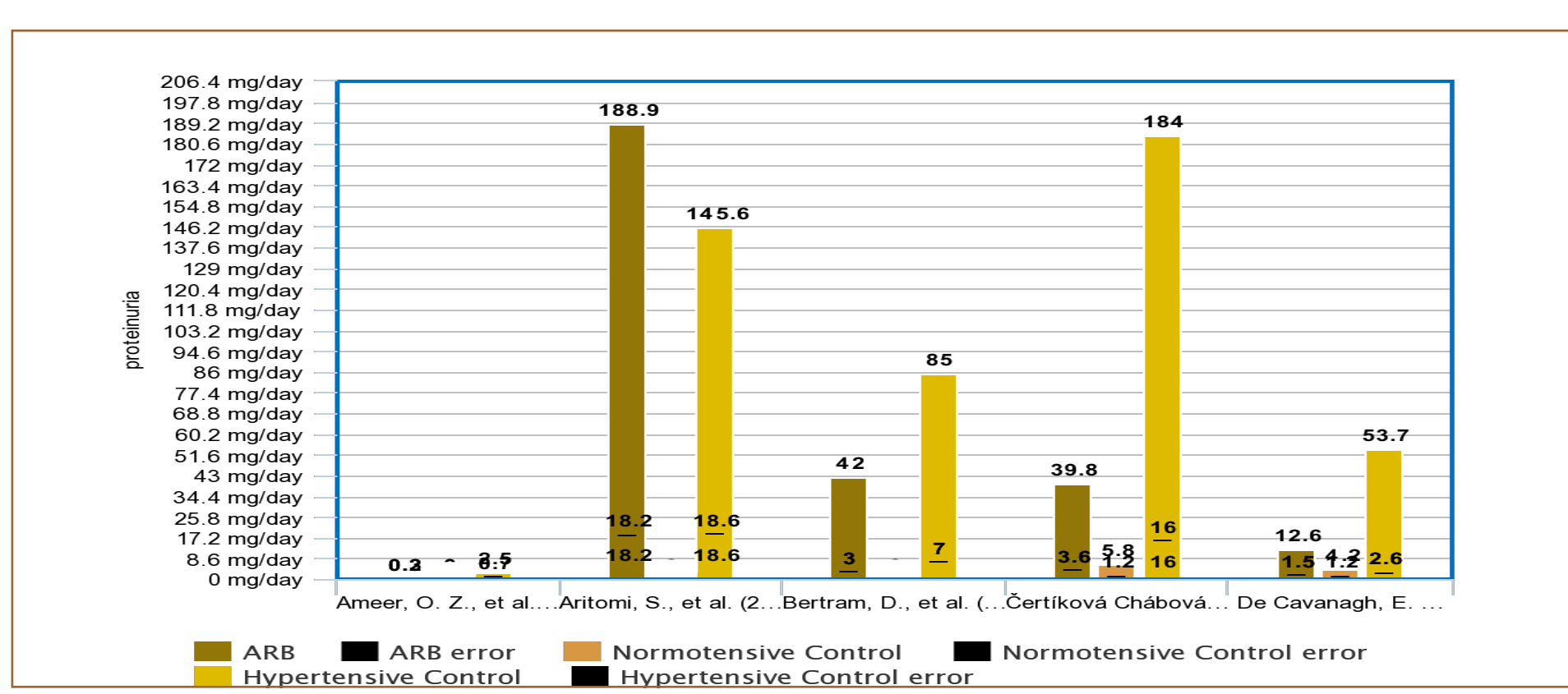


Figure 4. Proteinuria of ARBs vs HTN and normotensive control

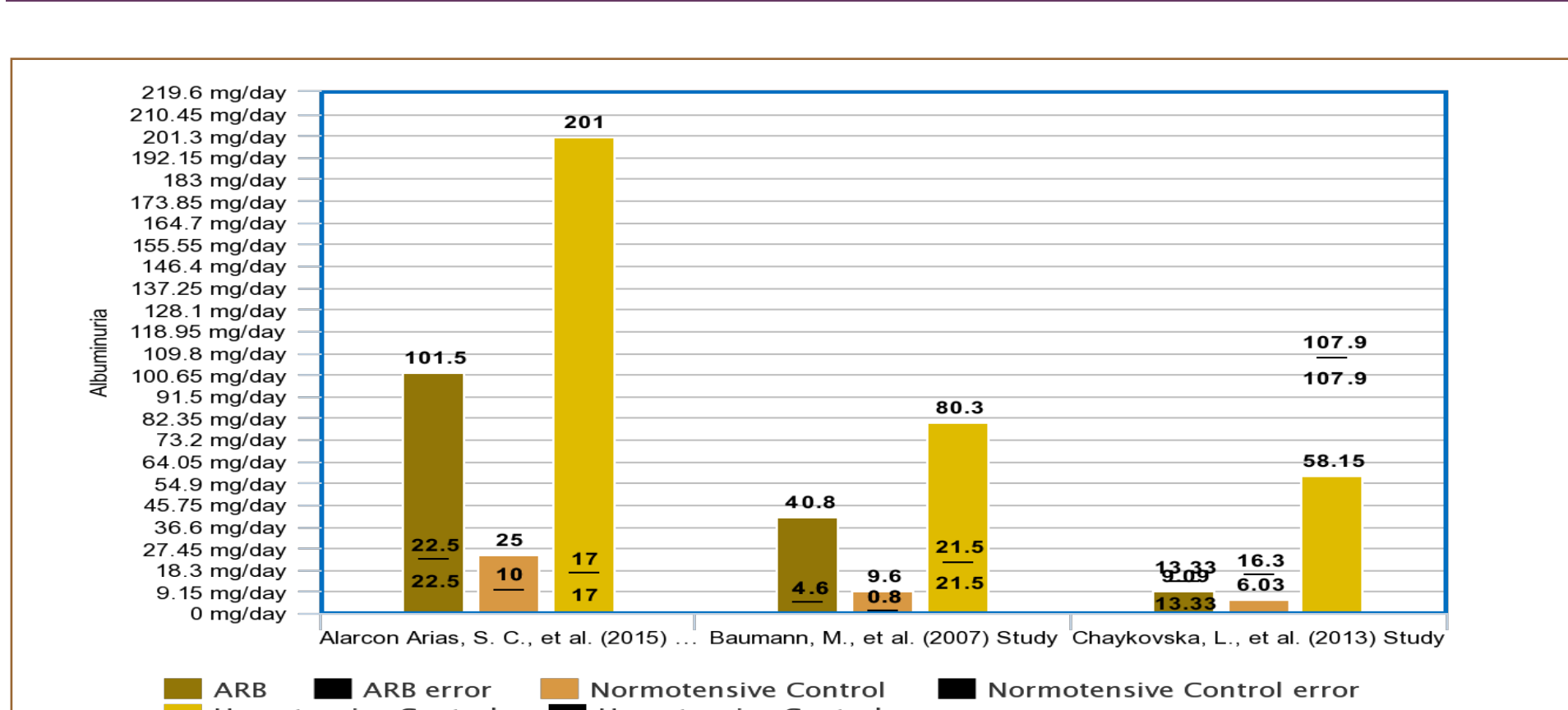


Figure 5. Albuminuria of ARBs vs HTN and normotensive control

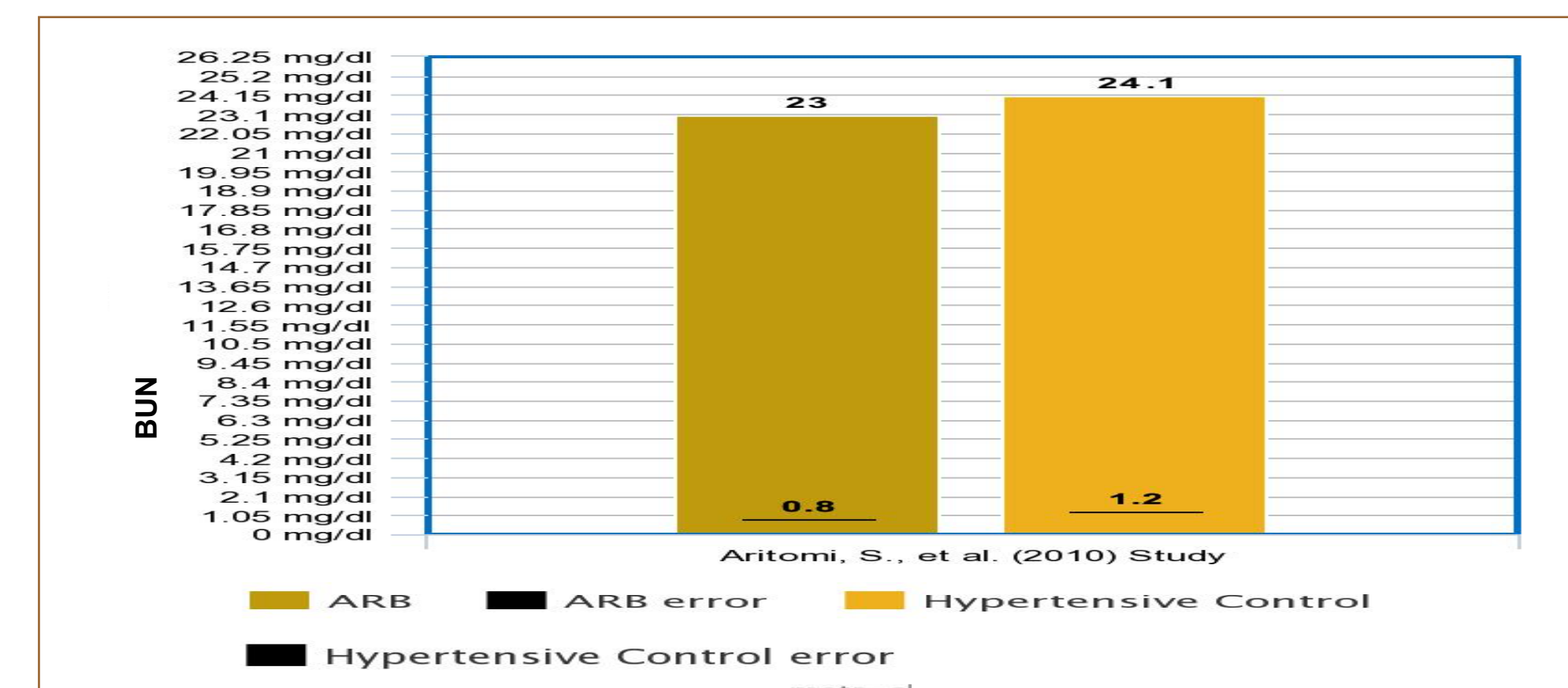


Figure 6. BUN of ARBs vs HTN and normotensive control

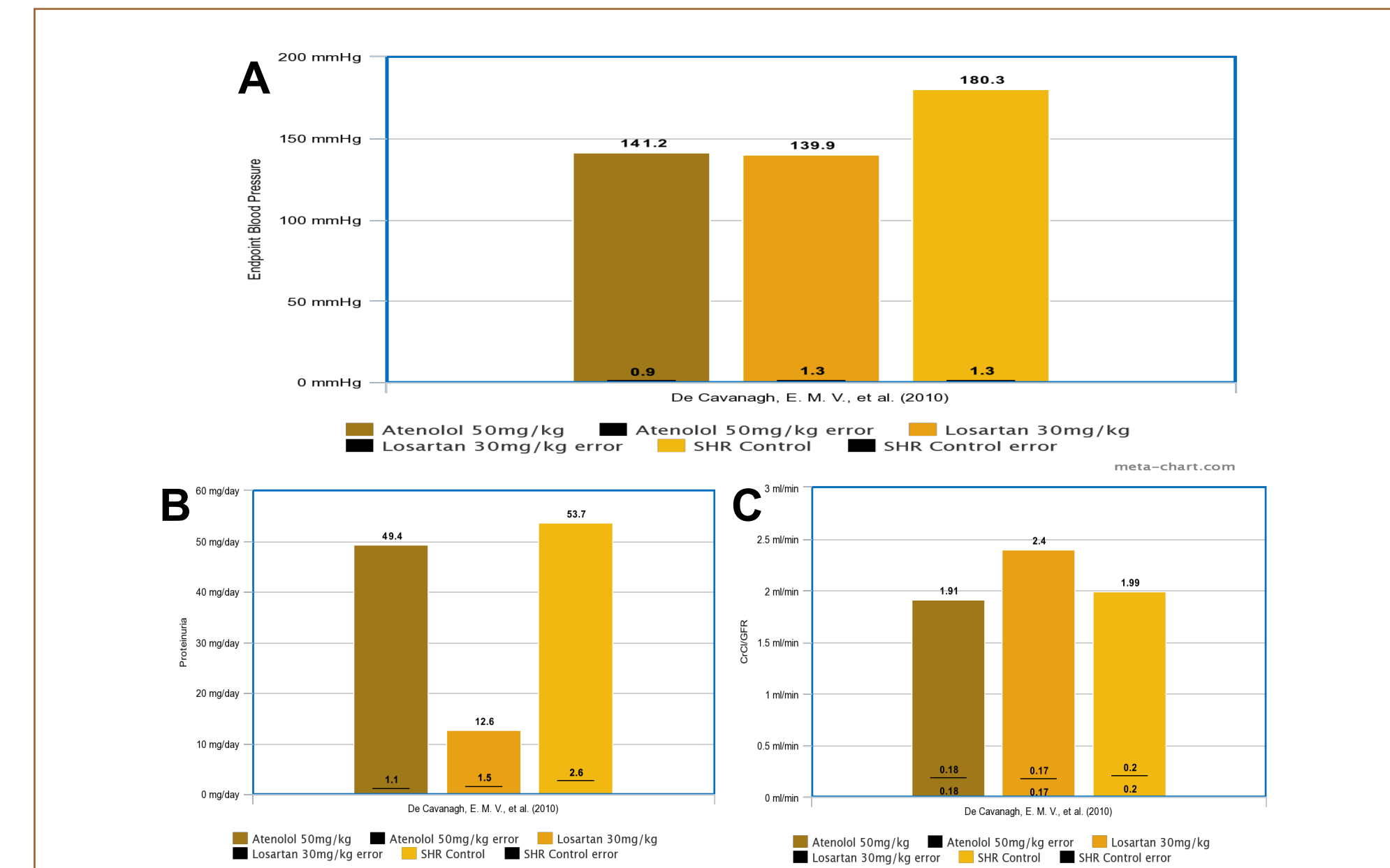


Figure 7. The endpoint BP (A), proteinuria (B), and CrCl (C) for atenolol 50mg vs losartan 30mg vs hypertensive (SHR) control.

## Results

### Literature Search

- 996 article remained after deduplication.
- 126 remaining after title-abstract screening.
- 56 were eligible after full test screening.
- Quality assessment done for 13 articles.
- Data were extracted from ten articles identified to have moderate or high-quality and were included in the preliminary analysis.

### Included Studies

- Ten studies conducted on a total of 537 rats.
- Four ARBs were reported in the ten studies, including; irbesartan (n=1), losartan (n=5), valsartan (n=3) and telmisartan (n=1).
- GRF/CrCl was reported in three studies. Two studies showed significant increase and one study showed no difference. Figure 3. represents average GFR from these studies.
- Proteinuria was reported in five studies. Four out of five studies showed significant reduction in albuminuria. Figure 4 represent average urinary protein excretion in one day for ARBs vs controls.
- Albuminuria was reported in three studies and all studies had significant reduction. figure 5. represents data from these studies.
- BUN was reported in one study with no significant difference. Figure 6. presents the data

## Limitations

- The review did not include all eligible studies due to time limitations.
- Variations in models of HTN, administered doses or agents contributed to variations in results.
- Inclusion was restricted to English articles only which might have contributed to missing eligible articles

## Conclusions

- Initial data are encouraging. ARBs have shown reno-protective effect in different hypertensive models in eight of ten studies.
- Primary results from one study (figure 7.) support that the reno-protective effect is independent of blood pressure lowering effect.
- Reno-protective effect was seen with all agents at appropriate dosing and results would be further empowered after the completion of this review.