Long-Term Effect of Patiromer for Hyperkalemia Treatment in Patients With HFmrEF and Diabetic Nephropathy on RAAS Inhibitors

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OBJECTIVES

To evaluate the safety and long-term tolerability of patiromer for the treatment of hyperkalemia in patients with chronic kidney disease (CKD), heart failure with mid ejection fraction (HFmrEF), diabetes mellitus (DM), and diabetic nephropathy.

METHODS

Patients with HFmrEF and diabetes (N=46) were treated for 52 weeks with either placebo or patiromer 8.4 g twice daily (BD) at baseline. Presence of CKD, diabetes, and diabetic nephropathy was confirmed by medical history, laboratory tests, and imaging.

RESULTS

No episodes of hyperkalemia were observed in the placebo group. Four patients in the patiromer group had serum K+ levels >5.5 mEq/L at any time during the study period, with one patient reaching a peak level of 6.0 mEq/L. No patients withdrew due to adverse events.

CONCLUSIONS

Patiromer was well tolerated in patients with HFmrEF and diabetes, and demonstrated a favorable safety profile in the long-term treatment of hyperkalemia. Further studies are needed to explore the impact of patiromer on kidney function.

METHODS

- **Participants**: 46 patients (32.6% were on an ARB alone. Overall, 29 patients were on diuretic therapy (n=3; 6.5%). Two (4.3%) patients withdrew due to low serum K+ levels and did not otherwise change in mean weight.
- **Outcome Measures**: Safety and tolerability were assessed by monitoring changes in serum K+ levels, incidence of adverse events, and patient withdrawal rates.

RESULTS

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