

# Chronic Kidney Disease Eligible for SGLT2 Inhibitors Through the Integration of Italian Administrative and Primary Care Data

**First published:** 17/07/2024

**Last updated:** 17/07/2024

Study

Finalised

## Administrative details

### EU PAS number

EUPAS1000000269

### Study ID

1000000269

### DARWIN EU® study

No

### Study countries

☐ Italy

### Study description

Patients with chronic kidney disease (CKD) can be successfully treated with sodium-glucose cotransporter-2 inhibitors (SGLT2-Is), regardless of diabetes. Fondazione Ricerca e Salute's (ReSD) administrative and Health Search's (HSD) primary care databases were combined in the Database Consortium ReS-HS to quantify and describe patients with CKD potentially eligible for SGLT2-Is and assess costs charged to the Italian National Health Service (SSN). Patients aged  $\geq 18$  with CKD and estimated glomerular filtration rate (eGFR)  $< 60$  ml/min in 2018, without dialysis and/or renal transplantation, were included. HSD was used to develop and validate algorithms for estimating eGFR, based on covariates, within the ReSD. Comorbidities, dispensed drugs, and direct healthcare costs were assessed. In 2018, 66,297 (5.0% of HSD population) and 211,494 (4.4% of ReSD population) patients with CKD potentially eligible for SGLT2-Is were identified (females  $\geq 58\%$ ). Prevalence increased with age with a peak at 75-84 years. Within HSD and ReSD cohorts, respectively: 31.0% and 41.5% had diabetes; in the observation periods,  $> 82\%$  and  $> 96\%$  received  $\geq 1$  pharmacological treatment, of which  $\geq 50\%$  and  $\geq 25\%$  received cardiovascular/blood agents and antidiabetics, respectively. From ReSD, mean per capita direct SSN cost was € 3,825 (CI 95%, € 3,655-€ 4,000): 50.1% due to hospitalizations, and 40.2% to pharmaceuticals (31.6% to cardiovascular drugs and 10.1% to antidiabetics).

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## **Study status**

Finalised

## Research institutions and networks

### Institutions

## Health Search, Italian College of General Practicioners

☐ Italy

**First published:** 02/03/2010

**Last updated:** 20/08/2024

**Institution**

Educational Institution

Other

## Fondazione ReS (Ricerca e Salute), CINECA partner

☐ Italy

**First published:** 05/07/2017

**Last updated:** 01/10/2025

**Institution**

Not-for-profit

ENCePP partner

## Contact details

### Study institution contact

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**Study contact**

[piccinni@fondazioneres.it](mailto:piccinni@fondazioneres.it)

### Primary lead investigator

Letizia Dondi

## Study timelines

### **Date when funding contract was signed**

Actual: 16/10/2022

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### **Study start date**

Actual: 16/03/2023

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### **Date of final study report**

Actual: 16/07/2023

## Sources of funding

- Pharmaceutical company and other private sector

## More details on funding

Astra Zeneca SpA

## Regulatory

### **Was the study required by a regulatory body?**

No

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### **Is the study required by a Risk Management Plan (RMP)?**

Not applicable

## Methodological aspects

## Study type

**Study topic:**

Disease /health condition

Human medicinal product

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**Study type:**

Non-interventional study

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**Scope of the study:**

Drug utilisation

Healthcare resource utilisation

**Data collection methods:**

Secondary use of data

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**Study design:**

Retrospective longitudinal cohort study

**Main study objective:**

To quantify and describe patients with CKD potentially eligible for SGLT2-Is and assess costs charged to the Italian National Health Service (SSN).

## Study Design

**Non-interventional study design**

Cohort

Cross-sectional

## Study drug and medical condition

## **Anatomical Therapeutic Chemical (ATC) code**

(A10BK) Sodium-glucose co-transporter 2 (SGLT2) inhibitors

Sodium-glucose co-transporter 2 (SGLT2) inhibitors

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## **Medical condition to be studied**

Chronic kidney disease

## Population studied

### **Short description of the study population**

Among patients aged  $\geq 18$ , alive by the end of 2018 and analyzable until 2013, with CKD and potentially eligible for SGLT2-Is

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### **Age groups**

- **Adult and elderly population ( $\geq 18$  years)**
  - Adults (18 to < 65 years)
    - Adults (18 to < 46 years)
    - Adults (46 to < 65 years)
  - Elderly ( $\geq 65$  years)
    - Adults (65 to < 75 years)
    - Adults (75 to < 85 years)
    - Adults (85 years and over)

## Study design details

### **Setting**

In-hospital and local outpatient setting in public and affiliated with SSN facilities for the database of Fondazione ReS. Primary care for the Health Search

## Summary results

In 2018, 66,297 (5.0% of HSD population) and 211,494 (4.4% of ReSD population) patients with CKD potentially eligible for SGLT2-Is were identified (females  $\geq 58\%$ ). Prevalence increased with age with a peak at 75-84 years. Within HSD and ReSD cohorts, respectively: 31.0% and 41.5% had diabetes; in the observation periods,  $>82\%$  and  $>96\%$  received  $\geq 1$  pharmacological treatment, of which  $\geq 50\%$  and  $\geq 25\%$  received cardiovascular/blood agents and antidiabetics, respectively. From ReSD, mean per capita direct SSN cost was € 3,825 (CI 95%, € 3,655-€ 4,000): 50.1% due to hospitalizations, and 40.2% to pharmaceuticals (31.6% to cardiovascular drugs and 10.1% to antidiabetics).

## Documents

### Study publications

[Chronic Kidney Disease Eligible for SGLT2 Inhibitors Through the Integration of...](#)

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## Data management

### ENCePP Seal

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

## Data sources

**Data source(s)**

Database of Fondazione ReS

Health Search/IQVIA Health Longitudinal Patient Database

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**Data sources (types)**

Administrative healthcare records (e.g., claims)

Electronic healthcare records (EHR)

## Use of a Common Data Model (CDM)

**CDM mapping**

No

## Data quality specifications

**Check conformance**

Yes

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**Check completeness**

Yes

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**Check stability**

Yes

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**Check logical consistency**

Yes

## Data characterisation



**Data characterisation conducted**

Yes