Effect of DPP4 Inhibitors on Microvascular Outcomes: A Meta-analysis of Cardiovascular Outcome Trials

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Background & Aims

Microvascular complications in type 2 diabetes represent a significant clinical burden:



Renal



Ocular



Neuropathic

This **meta-analysis** evaluates the protective effects of DPP4 inhibitors on microvascular outcomes in large cardiovascular outcome trials.

Material and Methods

Random effects meta-analysis applied to four randomized, double-blind, placebo-controlled trials of DPP4 inhibitors.



43,522

Participants

Selection Criteria: Long-term follow-up (>1 year) and microvascular outcomes of interest.

Microalbuminuria by 8%

(RR: 0.92, 95% CI 0.84-1.00, p=0.04)

[Figure-1]



ESRD by 5%

Results: DPP4 inhibitors reduced the risk of.....

(RR: 0.95, CI 0.75-1.20, p=0.66)

No change in Ocular outcomes

(RR 0.99, 95% CI 0.59-1.68, p=0.98)

		Experimental		Control		Risk Ratio		Risk Ratio	
	Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Random, 95% CI	M-H, Random, 95% CI	
ᅱ	Green et al	552	7332	553	7339	28.5%	1.00 [0.89, 1.12]	•	
	Rosenstock et al	745	3494	810	3485	35.7%	0.92 [0.84, 1.00]	.	
┨	Scirica et al	833	8280	969	8212	35.8%	0.85 [0.78, 0.93]	•	
	Total (95% CI)		19106		19036	100.0%	0.92 [0.84, 1.00]	•	
	Total events	2130		2332					
٦	Heterogeneity: Tau ² = 0.00; Chi ² = 4.78, df = 2 (P = 0.09); I ² = 58% Test for overall effect: Z = 2.03 (P = 0.04) Figure 1: DPP4i v/s placebo on microalbuminuria Favours [experimental] Favours [control]								100
									100
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Conclusion and Clinical Implications

DPP-4 inhibitors may help reduce early signs of kidney damage, such as microalbuminuria, in individuals with type 2 diabetes. Their influence on more advanced renal and ocular outcomes appears limited, though they show some potential in addressing certain microvascular complications.