

Supplemental material to:

Change in effectiveness parameters and safety after initiation of SGLT2 inhibitors for post-transplant diabetes mellitus: a real-world observational study

Author

Maria Cristina Crepaldi¹, Monica Vedovato¹, Mario Luca Morieri¹, Giovanni Basso¹, Lucia Federica Stefanelli¹, Marianna Alessi¹, Paola Fioretto¹, Gian Paolo Fadini^{1,2}

Affiliations

¹Department of Medicine, University of Padova, Padua, Italy.

²Veneto Institute of Molecular Medicine, Padua, Italy.

Correspondence

Professor Gian Paolo Fadini, MD PhD
Chair, Unit of Metabolic Diseases
Department of Medicine, University of Padova
Via Giustiniani 2, 35100 Padova
Phone +39 049 8214318
gianpaolo.fadini@unipd.it

Table S1. Transplant characteristics. Frequencies are presented as number (%).

Variable	Value
First transplant	
Kidney transplant, n (%)	33 (38.4)
Liver transplant, n (%)	50 (58.1)
Heart transplant, n (%)	3 (3.5)
Time since first transplant, years, mean (SD)	11.4 (8.4)
Cause of first kidney transplant (n=33)	
Not defined diagnosis (NDD), n (%)	13 (39.4)
Autosomal dominant polycystic kidney disease (ADPKD), n (%)	8 (24.2)
Glomerulonephritis (GN), n (%)	5 (15.2)
Diabetic nephropathy (DN), n (%)	4 (12.1)
Congenital anomalies of kidney and urinary tract (CAKUT), n (%)	2 (6.1)
Vesicoureteral reflux (VUR), n (%)	1 (3.0)
Cause of first liver transplant (n=50)	
Not defined diagnosis (NDD), n (%)	3 (6.1)
Hepatocellular carcinoma (HCC), n (%)	24 (49.0)
Alcohol-related liver disease, n (%)	11 (22.4)
Chronic viral hepatitis (HCV/HBV), n (%)	7 (14.3)
Metabolic dysfunction-associated steatotic liver disease (MASLD), n (%)	2 (4.1)
Primary sclerosing cholangitis (PSC), n (%)	2 (4.1)
Cause of first heart transplant (n=3)	
Dilated cardiomyopathy (DCM), n (%)	2 (66.7)
Hypertrophic cardiomyopathy (HCM), n (%)	1 (33.3)
Second transplant (n=9)	
Kidney transplant, n (%)	5 (55.6)
Liver transplant, n (%)	4 (44.4)
Time since second transplant, years, mean (SD)	9.1 (6.5)
Cause of second kidney transplant (n=5)	
Not defined diagnosis (NDD), n (%)	4 (80.0)
Rejection, n (%)	1 (20.0)
Cause of second liver transplant (n=4)	
Not defined diagnosis (NDD), n (%)	1 (25.0)
Rejection, n (%)	1 (25.0)
Liver cirrhosis, n (%)	1 (25.0)
Primary sclerosing cholangitis (PSC), n (%)	1 (25.0)

Table S2. Results of literature search. NR, not reported.

Author (Year) REF	N	Transplant Type	SGLT2i	Follow-up (months)	Δ HbA1c (%)	Δ Weight (kg)	Δ SBP (mmHg)	Δ eGFR (mL/min/1.73m ²)	Δ uACR (mg/g)	GU infections n (%)	Hospitalized n	Discontinuation due to infection n (%)	Discontinuation due to renal decline n (%)
Rajasekeran 2017 (1)	10	Kidney	Cana	12	-0.8	-2.1	-6.5	-4.3	NR	0	0	NR	NR
Kwon 2017 (2)	25	Kidney	Dapa, Empa	6	-0.5	-4.1	0	0.4	NR	NR	NR	2 (8)	0
Muir 2017 (3)	16	Heart	Empa	8	-0.6	-2.7	-12	1	NR	0	0	NR	NR
Halden 2019 (4)	22	Kidney	Empa	6	-0.2	-2.5	2	-3	NR	5 (22.7)	1	2 (9.1)	0
Attallah 2019 (5)	8	Kidney	Empa	12	-0.8	-1.5	NR	NR	NR	2 (25)	0	1 (12.5)	0
Mahling 2019 (6)	10	Kidney	Empa	12	-0.2	-1.4	-3	0	NR	2 (20)	0	NR	NR
Shah 2019 (7)	24	Kidney	Cana	6	-0.9	-2.4	-8	NR	NR	0	0	NR	NR
Schwaiger 2019 (8)	8	Kidney	Empa	12	0.4	-5	-5	-0.5	-13	NR	NR	NR	NR
Song 2020 (9)	50	Kidney	Empa, Dapa, Cana	6	-0.5	-3	NR	1	NR	NR	NR	5 (10)	0
AlKindi 2020 (10)	8	Kidney	Dapa, Empa	12	-1.9	NR	-9	NR	NR	2 (25)	1	NR	NR
Hisadome 2021 (11)	28	Kidney	Multiple	12	-0.1	-0.7	7	0.9	NR	NR	NR	NR	NR
Lemke 2022 (12)	39	Kidney	Multiple	12	-0.4	-1.6	NR	-2	NR	6 (15.4)	3	3 (7.7)	4 (10.3)
Marfella 2022 (13)	17	Heart	Multiple	12	-0.6	NR	NR	NR	NR	NR	NR	NR	NR
Garcia Carro 2022 (14)	284	Kidney	Multiple	6	-0.4	-2	-4.4	-2.8	-31	NR	NR	14 (4.9)	4 (1.4)
Sweiss 2023 (15)	49	Liver, Kidney, Lung	Multiple	3–12	-1	-3	NR	-3	NR	NR	NR	NR	NR
Sanchez Fructuoso 2023 (16)	339	Kidney	Multiple	6	-0.4	-2.2	-4.6	-2.1	-16	35 (10.3)	11	NR	NR
Yeggalam 2023 (17)	44	Kidney	Multiple	12	-0.4	-5.2	-2.7	4.1	NR	11 (25)	0	NR	NR
Mahmoud 2023 (18)	98	Kidney	Cana	12	-0.7	NR	-4.6	0.2	-53	15 (15.3)	1	0	0

Zengh 2024 (19)	87	Liver	Multiple	12	-0.7	-2.8	NR	-0.3	NR	NR	NR	NR	NR
Angjeli 2024 (20)	125	Kidney	Empa, Cana	24	0	NR	-0.4	-0.3	NR	NR	NR	NR	NR
Maigret 2025 (21)	226	Kidney	Dapa, Empa	6	NR	NR	-2	-0.9	NR	21 (9.3)	7	6 (2.7)	10 (4.4)
Butt 2025 (22)	20	Heart	Empa	6	-0.5	-1	NR	2	NR	1 (5)	0	NR	NR
Cehic 2025 (23)	20	Heart	Empa	12	-0.6	-2	-7	4	NR	0	0	NR	NR

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