

ClinicalTrials.gov: chronic kidney diseases | Last update posted in the last 7 days

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
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1	NCT04099992	<div><div><a href="#">Mindfulness in Chronic Kidney Disease</a></div><div>Study Documents:</div></div>	<div><div>Title Acronym:</div><div>Other Ids: IRB00110956 <a href="#">5R61AT010457 (U.S. NIH Grant/Contract )</a></div></div>	Recruiting	Chronic Kidney Diseases	<div><div><ul style="list-style-type: none"><li>Behavioral: Mindfulness-based stress reduction (MBSR) Mindfulness-based stress reduction (MBSR) is delivered in 8 weekly 2.5-hour group sessions and one day-long retreat that occurs after the 6th session. MBSR teaches to become more aware of thoughts, feelings, and sensations, and to skillfully respond to stressors. Each of the sessions includes education about mindfulness and stress; experiential mindfulness practice, and discussion of participants' experiences with mindfulness practice. Participants learn formal mindfulness practices (e.g., meditation, yoga, body scan, body scan) as well as informal such as awareness of breath, thoughts, or emotions, and mindfulness of daily activities. Participants will receive digital audio (MP3) downloads with guided MM practices, a home practice manual, and handouts with each week's assignments. Daily home practice will consist of 40-45 minutes of recorded practice. Participants will log their daily practice. If a participant misses a class, it is possible to make up the class on a different day.</li><li>Behavioral: Health enhancement program (HEP) 8-week health enhancement program (HEP) is designed to provide a structurally parallel, active control intervention to MBSR with health benefits in their own right, while omitting any components of mindfulness. HEP matches MBSR in structure and content, and in parallel to MBSR, consists of music therapy, nutritional education, posture and balance movements, walking and stretching. Work with all practices with group discussion and exercises during an all-day "spa day" will match the all-day retreat in MBSR. HEP participants will meet with a health educator in a group setting for 8 weekly 2.5-hour sessions. Participants will receive MP3 downloads on an MP3 player with recordings of health education topics, a home listening manual, and weekly handouts with each week's listening assignments. Participants will listen to these MP3 recordings daily for 40-45 minutes and log their daily adherence.</li><li>Device: Transcutaneous Vagus Nerve Stimulation (tVNS) Transcutaneous Vagus Nerve Stimulation (tVNS) is delivered using gammaCore (Electrocore), a multi-use, hand-held, rechargeable portable device consisting of a rechargeable battery, signal generating and amplifying electronics, and a button for operator control of the stimulation intensity. Conductive gel is applied to the stainless steel round discs on the device and placed vertically on the skin overlying the vagus nerve under the angle of the mandible, between the trachea and sternocleidomastoid muscle. A low-voltage electrical signal is delivered consisting of 5-kilohertz (kHz) sine wave series for 1 ms and repeated every 40 ms, with a maximum delivery of 24 V and 60 milliampere (mA) output. Stimulation amplitude is adjusted by the user and is increased until there is a vibration and slight muscle contraction in the lower face or neck. Stimulation is delivered for 2 minutes on the left side of the neck, and 2 minutes on the right side of the neck, for a total 4 minutes per one dose.</li><li>Device: Sham-transcutaneous Vagus Nerve Stimulation (tVNS) Sham stimulation will be delivered using a sham device that is identical in appearance and function, but programmed to produce a lower frequency biphasic signal that can be felt by the participant without actually stimulating the vagus nerve.</li></ul></div></div>	<div><div>Study Type: Interventional</div><div>Phase: Not Applicable</div><div>Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Protocol 1 (R61): 50 CKD participants will be randomized to MBSR (N=25) versus an active control intervention (health enhancement program, HEP; N=25).  Protocol 2 (R33): 75 CKD participants will be randomized to MBSR+tVNS (n=25), MBSR+sham-tVNS (n=25), HEP+tVNS (n=25), and HEP+sham-tVNS (n=25).  Masking: Triple (Participant, Investigator, Outcomes Assessor) Masking Description: A third-party investigator outside of the research team will label both real and sham devices with a coded number so that both participants and investigators can remain double-masked during the clinical trial. Primary Purpose: Treatment</div><div>Primary Outcome Measures: <i>Same as current</i></div><div>Secondary Outcome Measures: <i>Same as current</i></div></div>	<div><div>Actual Enrollment:</div><div>Estimated Enrollment: 150</div><div>Original Estimated Enrollment: 125</div><div>Age: 40 Years to 80 Years (Adult, Older Adult)</div><div>Sex: All</div></div>	<div><div>Study Sponsors: <i>Same as current</i></div><div>Collaborators: National Center for Complementary and Integrative Health (NCCIH)</div></div>	<div><div>Study Start: September 20, 2019</div><div>Primary Completion: August 2025 (Final data collection date for primary outcome measure)</div><div>Study Completion: August 2025</div><div>First Posted: September 23, 2019</div><div>Results First Posted:</div><div>Last Update Posted: September 14, 2022</div></div>
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2	NCT05504850	<a href="#">Multicultural Healthy Diet in Chronic Kidney Disease</a>  Study Documents:	Title Acronym:  Other Ids: 2021-12753	Recruiting	Chronic Kidney Disease	<p>Other: Multicultural Health Diet</p> <p>The food-based components will be similar to the anti-inflammatory diet of the ongoing MHD study (NCT03240406), which emphasizes limiting animal and high saturated fat foods with focus on anti-inflammatory foods/food components specific to the cultural context of the participant. The diet will also be tailored to needs of the CKD population including a focus on lowering sodium intake. The intervention (dietary counseling) will be delivered by experienced kidney disease nutritionist.</p>	<p>Study Type: Interventional</p> <p>Phase: Not Applicable</p> <p>Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Other</p> <p>Primary Outcome Measures: <i>Same as current</i></p> <p>Secondary Outcome Measures: Not Provided</p>	<p>Actual Enrollment:</p> <p>Estimated Enrollment: 20</p> <p>Original Estimated Enrollment: <i>Same as current</i></p> <p>Age: 18 Years to 85 Years (Adult, Older Adult)</p> <p>Sex: All</p>	<p>Study Sponsors: <i>Same as current</i></p> <p>Collaborators: Not Provided</p>	<p>Study Start: September 30, 2022</p> <p>Primary Completion: November 2023 (Final data collection date for primary outcome measure)</p> <p>Study Completion: February 2024</p> <p>First Posted: August 17, 2022</p> <p>Results First Posted:</p> <p>Last Update Posted: September 13, 2022</p>
3	NCT02411773	<a href="#">Sympatholysis in Chronic Kidney Disease</a>  Study Documents:	Title Acronym:  Other Ids: IRB00078214 <a href="#">2R01HL135183 ( U.S. NIH Grant/Contract )</a>	Recruiting	Chronic Kidney Disease	<ul style="list-style-type: none"><li>• Drug: Sodium Bicarbonate Sodium bicarbonate tablet is 650 mg for one tablet. Oral sodium bicarbonate will be given out as 1300mg-2600mg (2-4 pills) prior to each exercise or stretching session. Serum bicarbonate measurements will be monitored throughout the study (at 2 weeks, then every 2-4 weeks thereafter), and bicarbonate dosages will be adjusted to avoid metabolic alkalosis (serum HCO3 &gt; 30).</li><li>• Drug: Placebo 2-4 placebo pills will be given out prior to each exercise or stretching session</li><li>• Other: Exercise Training Exercise training consists of riding a stationary bicycle for 20-45 minutes, 3 times per week, supervised by trained exercise specialists, for 6-12 weeks. The exercise program will follow the guidelines provided by the American College of Sports Medicine (ACSM) for optimizing cardiovascular fitness. Exercise intensity will begin at low levels (50 percent of resting heart rate) and increase to no greater than 80 percent of resting heart rate. Exercise time will progress, depending on subject's progress, from 20 minutes per session at first, to a maximum of 45 minutes. Trained staff members will give instructions throughout each exercise session. Before beginning each exercise session, subjects will be instructed on a warm-up focusing on preparing the legs for activity.</li><li>• Other: Stretching Stretching exercise will consist of muscle stretching and toning for 20-45 minutes, 3 times per week, supervised by trained exercise specialists, for 6-12 weeks. Trained staff members will guide subjects with the stretching exercises, and activities are designed to increase flexibility and range of motion. Before beginning each stretching exercise session, subjects will be instructed to warm-up.</li></ul>	<p>Study Type: Interventional</p> <p>Phase: Phase 2</p> <p>Study Design: Allocation: Randomized Intervention Model: Factorial Assignment Masking: None (Open Label) Primary Purpose: Treatment</p> <p>Primary Outcome Measures: <i>Same as current</i></p> <p>Secondary Outcome Measures: <i>Same as current</i></p>	<p>Actual Enrollment:</p> <p>Estimated Enrollment: 110</p> <p>Original Estimated Enrollment: <i>Same as current</i></p> <p>Age: 18 Years to 75 Years (Adult, Older Adult)</p> <p>Sex: All</p>	<p>Study Sponsors: <i>Same as current</i></p> <p>Collaborators: National Heart, Lung, and Blood Institute (NHLBI)</p>	<p>Study Start: May 2015</p> <p>Primary Completion: November 2023 (Final data collection date for primary outcome measure)</p> <p>Study Completion: November 2023</p> <p>First Posted: April 8, 2015</p> <p>Results First Posted:</p> <p>Last Update Posted: September 14, 2022</p>

4	NCT05526157	<a href="#">An Observational Study, Called FINEGUST, to Learn More About How People With Chronic Kidney Disease and Type 2 Diabetes Are Treated and How the Introduction of New Treatment Options, Like Finerenone, Impacts Clinical Practice</a>  Study Documents:	Title Acronym:  Other Ids: 21956	Not yet recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Disease</li><li>Type 2 Diabetes Mellitus</li></ul>	<ul style="list-style-type: none"><li>Drug: Finerenone (Kerendia, BAY 948862) Retrospective analysis using secondary data collection from various sources</li><li>Drug: Sodium-glucose cotransporter 2 inhibitors (SGLT2i) Retrospective analysis using secondary data collection from various sources</li><li>Drug: Glucagon-like peptide-1 receptor agonists (GLP 1 RA) Retrospective analysis using secondary data collection from various sources</li><li>Drug: Steroidal mineral corticoid receptor antagonists (sMRA) Retrospective analysis using secondary data collection from various sources</li><li>Drug: Non-steroidal mineral corticoid receptor antagonists (nsMRA) Retrospective analysis using secondary data collection from various sources</li></ul>	Study Type: Observational  Phase:  Study Design: Observational Model: Cohort Time Perspective: Retrospective  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 50000  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: October 1, 2022  Primary Completion: September 30, 2024 (Final data collection date for primary outcome measure)  Study Completion: September 30, 2024  First Posted: September 2, 2022  Results First Posted:  Last Update Posted: September 14, 2022
5	NCT01806610	<a href="#">Study of Safety and Tolerability of BPS804 in Patients With Late-stage Chronic Kidney Disease</a>  Study Documents:	Title Acronym:  Other Ids: CBPS804A2204 2012-003348-63 ( EudraCT Number )	Withdrawn	Chronic-kidney Disease Stage 5D on Stable Hemodialysis	<ul style="list-style-type: none"><li>Drug: BPS804 Single dose BPS804 administration. Other Name: Active BPS804.</li><li>Drug: Placebo Single dose placebo administration. Other Name: BPS804 placebo.</li></ul>	Study Type: Interventional  Phase: Phase 2  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Double (Participant, Investigator) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: 0  Estimated Enrollment:  Original Estimated Enrollment: 10  Age: 18 Years to 80 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Novartis Pharmaceuticals</a>  Collaborators: <ul style="list-style-type: none"><li>Mereo BioPharma</li><li>Novartis</li></ul>	Study Start: August 2013  Primary Completion: April 2014 (Final data collection date for primary outcome measure)  Study Completion: April 2014  First Posted: March 7, 2013  Results First Posted:  Last Update Posted: September 14, 2022

6	NCT04413266	<a href="#">Effects of Curcumin Supplementation in Patients With Chronic Kidney Disease on Peritoneal Dialysis</a>  Study Documents:	Title Acronym:  Other Ids: Denise Mafra7	Recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Diseases</li><li>Peritoneal Dialysis</li><li>Hemodialysis</li></ul>	Dietary Supplement: Curcumin supplementation The patients will receive 3 capsules per day containing 500mg of curcumin for 4 weeks  Other Names: <ul style="list-style-type: none"><li>Dietary Supplement</li><li>Placebo</li></ul>	Study Type: Interventional  Phase: Not Applicable  Study Design: Allocation: Randomized Intervention Model: Crossover Assignment Masking: Triple (Participant, Investigator, Outcomes Assessor) Primary Purpose: Health Services Research  Primary Outcome Measures: <ul style="list-style-type: none"><li>Antioxidants and anti-inflammatory biomarkers [ Time Frame: 4 weeks ]  Get blood samples to evaluate the supplementation effects in antioxidants biomarkers- nuclear receptor factor 2 (Nrf2), glutathioneperoxidase (GPx), heme oxygenase-1 (HO-1), NQO1</li><li>Inflammatory biomarkers [ Time Frame: 4 weeks ]  Get blood samples to evaluate the supplementation effects in inflammatory biomarkers- factor nuclear kappa B (NFkB), interleukin 6 (IL-6), tumor necrosis factor alpha (TNF-alpha), PCR, IL-1B, IL-18, TBARS, Inflammassome</li></ul> Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 30  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 60 Years (Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: October 10, 2020  Primary Completion: June 2023 (Final data collection date for primary outcome measure)  Study Completion: June 2023  First Posted: June 2, 2020  Results First Posted:  Last Update Posted: September 16, 2022
7	NCT04115345	<a href="#">A Study of a Renal Autologous Cell Therapy (REACT®) in Patients With Chronic Kidney Disease (CKD) From Congenital Anomalies of the Kidney and Urinary Tract (CAKUT).</a>  Study Documents:	Title Acronym:  Other Ids: REGEN-004	Recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Disease</li><li>Congenital Anomalies of Kidney and Urinary Tract</li></ul>	Biological: Renal Autologous Cell Therapy (REACT®) Autologous selected renal cells (SRC)	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: N/A Intervention Model: Single Group Assignment Intervention Model Description: Open-label Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Assess change in eGFR and observe incidence of renal-specific procedure and/or product related adverse events (AEs) through 24 months following two Renal Autologous Cell Therapy (REACT) injections [Safety]. [ Time Frame: 12 months following last REACT injection ] The primary objective is to assess the safety and optimal delivery of Renal Autologous Cell Therapy (REACT) injected at one site in a recipient kidney as measured by procedure-and/or product related adverse events (AEs) through 12 months post-treatment.  Secondary Outcome Measures: Number of subjects with renal-specific adverse events over a 24-month period following injection of Renal Autologous Cell Therapy (REACT). [ Time Frame: 24 months following last REACT injection ] The number of subjects with renal-specific adverse events over a 24-month period following injection of Renal Autologous Cell Therapy (REACT) will be observed utilizing renal-specific laboratory assessments.The secondary objective will compare the results of laboratory tests from baseline through 12 months following REACT injection, followed by an additional observational period of 18 months for a total of 24 months of observation. Each subject's baseline rate of CKD disease progression serves as his/her own "control" to monitor for changes in renal insufficiency over time.	Actual Enrollment:  Estimated Enrollment: 15  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 65 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: CTI Clinical Trial and Consulting Services	Study Start: August 13, 2019  Primary Completion: March 31, 2023 (Final data collection date for primary outcome measure)  Study Completion: May 30, 2023  First Posted: October 4, 2019  Results First Posted:  Last Update Posted: September 16, 2022

8	NCT04538157	<a href="#">Comprehensive Geriatric Assessment for Frail Older People With Chronic Kidney Disease - The GOAL Trial</a>  Study Documents:	Title Acronym:  Other Ids: AKTN 20.01	Recruiting	<ul style="list-style-type: none"><li>Frailty</li><li>Chronic Kidney Diseases</li></ul>	Other: Comprehensive Geriatric Assessment A CGA is a diagnostic and therapeutic intervention which initially identifies an older person's medical, functional, psychosocial problems and then tailors coordinated management plans to address them. Other Name: CGA	Study Type: Interventional  Phase: Not Applicable  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Single (Outcomes Assessor) Primary Purpose: Supportive Care  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 500  Original Estimated Enrollment: <i>Same as current</i>  Age: 55 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: National Health and Medical Research Council, Australia	Study Start: March 15, 2021  Primary Completion: March 30, 2023 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2023  First Posted: September 3, 2020  Results First Posted:  Last Update Posted: September 14, 2022
9	NCT05540431	<a href="#">Evaluation of Protective Effect of Activated Charcoal and Probiotic Against Progression of Chronic Kidney Disease</a>  Study Documents:	Title Acronym:  Other Ids: Uremic toxin in CKD	Not yet recruiting	Uremic Toxin	<ul style="list-style-type: none"><li>Drug: Activated Charcoal RCT</li><li>Dietary Supplement: Probiotic RCT</li><li>Other: No intervention RCT</li></ul>	Study Type: Interventional  Phase: Phase 2 Phase 3  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Interventional (clinical trial) Masking: None (Open Label) Masking Description: None (Open Label) Primary Purpose: Prevention  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 60  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 90 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: September 25, 2022  Primary Completion: September 20, 2023 (Final data collection date for primary outcome measure)  Study Completion: December 20, 2023  First Posted: September 14, 2022  Results First Posted:  Last Update Posted: September 14, 2022



10	NCT0329 9816	<a href="#">Five, Plus Nuts and Beans for Kidneys</a>  Study Documents:	Title Acronym:  Other Ids: IRB00122943 <a href="#">1U01MD010550 -01 ( U.S. NIH Grant/Contract )</a>	Completed	<ul style="list-style-type: none"><li>Chronic Kidney Disease</li><li>Hypertensi on</li></ul>	<ul style="list-style-type: none"><li>Behavioral: Coaching DASH group (C-DASH) Participants assigned to the C-DASH diet advice group will be provided \$30/week worth of fruits, vegetables, nuts and beans ordered through the study coach and delivered to a community location to reach a certain goal of potassium intake (months 0-4). During phase 2 of the study (months 5-12), a study coach will continue telephonic contact with the participants to set goals for following a DASH-like diet without the weekly food allowance.  Other Name: Coaching DASH diet advice group (C-DASH)</li><li>Behavioral: Self-Shopping DASH group (S-DASH) Participants will be given a brochure containing information about the DASH diet which will be reviewed with a study team member. In months 1-4, participants will receive a gift card equivalent to a weekly allowance of \$30 to Klein's ShopRite stores of Maryland for purchases of food and beverages of their choice. During phase two (months 5-12), they will be asked to continue following a DASH-like diet but will not receive a gift card for purchases.  Other Name: Self-Shopping DASH diet advice Group (S-DASH)</li></ul>	<div>Study Type: Interventional</div> <div>Phase: Not Applicable</div> <div>Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Single center, randomized controlled trial with two parallel arms. Masking: Single (Outcomes Assessor) Primary Purpose: Treatment</div> <div>Primary Outcome Measures:<ul style="list-style-type: none"><li>Change in Albuminuria from Baseline to 1 month [ Time Frame: Baseline, 1 month ]  Urine samples will be collected for ACR (albumin-to-creatinine ratio). Albuminuria is defined as an ACR 30 mg/g.</li><li>Change in Albuminuria from Baseline to 4 months [ Time Frame: Baseline, 4 months ]  Urine samples will be collected for ACR (albumin-to-creatinine ratio). Albuminuria is defined as an ACR 30 mg/g.</li><li>Change in Albuminuria from Baseline to end of study [ Time Frame: Baseline, end of study (approximately 12 months) ]  Urine samples will be collected for ACR (albumin-to-creatinine ratio). Albuminuria is defined as an ACR 30 mg/g.</li></ul></div> <div>Secondary Outcome Measures:<ul style="list-style-type: none"><li>Change in Systolic Blood Pressure [ Time Frame: Baseline, 1 month ]  Daytime systolic blood pressure monitoring will be determined using OMRON 907-xl</li><li>Change in Systolic Blood Pressure [ Time Frame: Baseline,4 months ]  Daytime systolic blood pressure monitoring will be determined using OMRON 907-xl</li><li>Change in Systolic Blood Pressure [ Time Frame: Baseline, end of study (approximately 12 months) ]  Daytime systolic blood pressure monitoring will be determined using OMRON 907-xl</li></ul></div>	<div>Actual Enrollment: 142</div> <div>Estimated Enrollment:</div> <div>Original Estimated Enrollment: 150</div> <div>Age: 21 Years to 100 Years (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <a href="#">Same as current</a></div> <div>Collaborators: National Institute on Minority Health and Health Disparities (NIMHD)</div>	<div>Study Start: February 22, 2018</div> <div>Primary Completion: November 22, 2021 (Final data collection date for primary outcome measure)</div> <div>Study Completion: December 8, 2021</div> <div>First Posted: October 3, 2017</div> <div>Results First Posted:</div> <div>Last Update Posted: September 15, 2022</div>
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11	NCT05457283	<a href="#">A Study to Learn More About How Safe the Study Treatment Finerenone is in Long-term Use When Taken With an ACE Inhibitor or Angiotensin Receptor Blocker Over 18 Months of Use in Children and Young Adults From 1 to 18 Years of Age With Chronic Kidney Disease and Proteinuria</a>  Study Documents:	Title Acronym:  Other Ids: 201862021-002905-89 ( EudraCT Number )	Not yet recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Disease</li><li>Proteinuria</li><li>Children</li></ul>	Drug: Finerenone (Kerendia, BAY94-8862) Finerenone in different doses, treatment duration will be 540 ±7 days.	Study Type: Interventional  Phase: Phase 3  Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 100  Original Estimated Enrollment: <i>Same as current</i>  Age: 1 Year to 18 Years (Child, Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: November 2, 2022  Primary Completion: February 11, 2028 (Final data collection date for primary outcome measure)  Study Completion: March 12, 2028  First Posted: July 13, 2022  Results First Posted:  Last Update Posted: September 13, 2022
12	NCT05536804	<a href="#">A Study of Tirzepatide (LY3298176) in Participants With Overweight or Obesity and Chronic Kidney Disease With or Without Type 2 Diabetes</a>  Study Documents:	Title Acronym:  Other Ids: 17217 I8F-MC-GPIG ( Other Identifier: Eli Lilly and Company ) 2021-005273-47 ( EudraCT Number )	Not yet recruiting	<ul style="list-style-type: none"><li>Overweight</li><li>Obesity</li><li>Chronic Kidney Disease</li><li>Type 2 Diabetes</li><li>T2D</li></ul>	<ul style="list-style-type: none"><li>Drug: Tirzepatide Administered SC</li><li>Drug: Placebo Administered SC</li></ul>	Study Type: Interventional  Phase: Phase 2  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Double (Participant, Investigator) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 140  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: October 14, 2022  Primary Completion: October 10, 2025 (Final data collection date for primary outcome measure)  Study Completion: November 7, 2025  First Posted: September 13, 2022  Results First Posted:  Last Update Posted: September 13, 2022



13	NCT05543291	<a href="#">Multi-omics Analysis of Chronic Kidney Disease</a>  Study Documents:	Title Acronym:  Other Ids: SHYS-IEC-5.0/22K162/P01	Recruiting	Potential Mechanisms Underlying the Microbiota-Gut-Kidney Axis in CKD	Behavioral: renal function levels of eGFR	Study Type: Observational  Phase:  Study Design: Observational Model: Cohort Time Perspective: Cross-Sectional  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 150  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: January 1, 2022  Primary Completion: December 31, 2024 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2024  First Posted: September 16, 2022  Results First Posted:  Last Update Posted: September 16, 2022
14	NCT05254002	<a href="#">A Study to Learn How Well the Treatment Combination of Finerenone and Empagliflozin Works and How Safe it is Compared to Each Treatment Alone in Adult Participants With Long-term Kidney Disease (Chronic Kidney Disease) and Type 2 Diabetes</a>  Study Documents:	Title Acronym:  Other Ids: 21839 2021-003037-11 ( EudraCT Number )	Recruiting	<ul style="list-style-type: none"><li>Type 2 Diabetes Mellitus</li><li>Chronic Kidney Disease</li></ul>	<ul style="list-style-type: none"><li>Drug: Finerenone (Kerendia, BAY94-8862 ) oral administration, once daily</li><li>Drug: Empagliflozin oral administration, once daily</li><li>Drug: Placebo oral administration, once daily Other Name: Placebo to finerenone, and placebo to empagliflozin</li></ul>	Study Type: Interventional  Phase: Phase 2  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 807  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: June 23, 2022  Primary Completion: December 15, 2023 (Final data collection date for primary outcome measure)  Study Completion: January 12, 2024  First Posted: February 24, 2022  Results First Posted:  Last Update Posted: September 13, 2022

15	NCT05531214	<a href="#">Creating A Cardiorenal Multidisciplinary Team for Management HF and CKD Patients</a>  Study Documents:	Title Acronym:  Other Ids: NCR224155	Recruiting	<ul style="list-style-type: none"><li>Heart Failure</li><li>Chronic Kidney Diseases</li></ul>	Behavioral: Multidisciplinary Care Coordination Team The intervention group will be patients whose primary care clinicians will be receiving guidance and recommendations from the multidisciplinary team consisting of cardiologists, nephrologists, and specialty pharmacists.	<div>Study Type: Interventional</div> <div>Phase: Not Applicable</div> <div>Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Our pragmatic randomized controlled trial will firstly identify primary care clinicians (PCCs) currently working at the George Washington University Medical Faculty Associates (GW-MFA) who care for adult patients diagnosed with both heart failure with a reduced ejection fraction (HFrEF) and chronic kidney disease (CKD). 164 patients who meet our inclusion criteria will be first identified via their respective PCCs at the GW-MFA. These PCCs will be randomized to the control and intervention arms, and the intervention arm will be receiving recommendations from a multidisciplinary team of cardiologists and nephrologists. Masking: Single (Participant) Masking Description: These primary care clinicians will then be block randomized using a 1:1 ratio to either arm of treatment utilizing random number generation. Primary care clinicians will be stratified by the size of their individual practices, and patients will be stratified by EF prior to their enrollment to balance the representation of patients with HFrEF (EF &lt; 50%) and heart failure with mildly reduced ejection fraction (HFmrEF) (EF 41-49%), respectively. Primary Purpose: Other</div> <div>Primary Outcome Measures: <i>Same as current</i></div> <div>Secondary Outcome Measures: <i>Same as current</i></div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 160</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: 18 Years and older (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Not Provided</div>	<div>Study Start: June 1, 2022</div> <div>Primary Completion: January 1, 2023 (Final data collection date for primary outcome measure)</div> <div>Study Completion: June 1, 2023</div> <div>First Posted: September 7, 2022</div> <div>Results First Posted:</div> <div>Last Update Posted: September 13, 2022</div>
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16	NCT04724837	<a href="#">Zibotentan and Dapagliflozin for the Treatment of CKD (ZENITH-CKD Trial)</a>  Study Documents:	Title Acronym:  Other Ids: D4325C00001 2020-004101-32 ( EudraCT Number )	Recruiting	Chronic Kidney Disease	<ul style="list-style-type: none"><li>• Drug: Zibotentan Participants will receive zibotentan as per the arms they are randomized.</li><li>• Drug: Dapagliflozin Participants will receive dapagliflozin as per the arms they are randomized.</li><li>• Drug: Placebo Participants will receive placebo as per the arms they are randomized to.</li></ul>	<div>Study Type: Interventional</div> <div>Phase: Phase 2</div> <div>Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Triple (Participant, Care Provider, Investigator) Primary Purpose: Treatment</div> <div>Primary Outcome Measures: Change in Log-transformed Urinary Albumin to Creatinine Ratio (UACR) from baseline to Week 12 [ Time Frame: From baseline (Week 0 [Day 1]) until Week 12 (Day 84) ]  Integrated data from Part A and B will be used for assessment of effect of zibotentan and dapagliflozin in combination and alone versus placebo on UACR.</div> <div>Secondary Outcome Measures:<ul style="list-style-type: none"><li>• Change in Log-transformed UACR from baseline to Week 12 [ Time Frame: From baseline (Week 0 [Day 1]) until Week 12 (Day 84) ]  Integrated data from Part A and B will be used for assessment of the change in UACR for doses of zibotentan combined with 10 mg dapagliflozin versus 10 mg dapagliflozin alone.</li><li>• Change in Blood Pressure from baseline to Week 12 [ Time Frame: From baseline (Week 0 [Day 1]) until Week 12 (Day 84) ]  Integrated data from Part A and B will be used for assessment of the change in office systolic and diastolic blood pressure (BP) for doses of zibotentan combined with 10 mg dapagliflozin and for zibotentan and 10 mg dapagliflozin alone versus placebo. Integrated data from Part A and B</li><li>• Least Squares Mean Change of UACR at Week 12 for Zibotentan and Dapagliflozin in Combination and Dapagliflozin alone [ Time Frame: At Week 12 (Day 84) ]  Integrated data from Part A and B will be used for assessment of dose-response significance and relationship across different dose of zibotentan/dapagliflozin and dapagliflozin alone on UACR reduction. Integrated data from Part A and B.</li><li>• Change in eGFR from Baseline to Week 1, Week 12 and Week 14 [ Time Frame: From baseline (Week 0 [Day 1]) until Week 1, Week 12, and Week 14 ]  Integrated data from Part A and B will be used for assessment of the effect of ranging doses of zibotentan and dapagliflozin in combination and alone on eGFR.</li><li>• Change in eGFR from Week 1 to Week 12 [ Time Frame: From Week 1 (Day 8) until Week 12 (Day 84) ]  Integrated data from Part A and B will be used for assessment of the effect of ranging doses of zibotentan and dapagliflozin in combination and alone on eGFR.</li><li>• Number of Participants Experiencing Adverse events [ Time Frame: From Week 0 (Day 1) until Follow-up visit (Week 14 [Day 98]) ]  Integrated data from Part A and B will be used for assessment of the safety and tolerability of ranging doses of zibotentan and dapagliflozin in combination and alone versus placebo.</li></ul></div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 495</div> <div>Original Estimated Enrollment: 660</div> <div>Age: 18 Years to 130 Years (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Not Provided</div>	<div>Study Start: April 28, 2021</div> <div>Primary Completion: March 10, 2023 (Final data collection date for primary outcome measure)</div> <div>Study Completion: March 10, 2023</div> <div>First Posted: January 26, 2021</div> <div>Results First Posted:</div> <div>Last Update Posted: September 13, 2022</div>
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17	NCT05544513	<a href="#">Oral Iron Supplementation for Patients With Chronic Kidney Disease</a>  Study Documents:	Title Acronym:  Other Ids: DeniseMafra14	Active, not recruiting	<ul style="list-style-type: none"><li>Chronic Renal Disease</li><li>Iron-Deficiency Anemia</li><li>Anemia of Chronic Kidney Disease</li><li>Dysbiosis</li></ul>	Drug: Ferrous sulfate Ferrous sulfate supplementation	Study Type: Interventional  Phase: Phase 2  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Single (Participant) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: <i>Same as current</i>  Estimated Enrollment:  Original Estimated Enrollment:  Age: 18 Years to 75 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: August 1, 2022  Primary Completion: December 29, 2023 (Final data collection date for primary outcome measure)  Study Completion: December 30, 2026  First Posted: September 16, 2022  Results First Posted:  Last Update Posted: September 16, 2022
18	NCT05543928	<a href="#">Phase 3 Safety and Efficacy Study of CTAP101 Extended-release Capsules in Children With Secondary Hyperparathyroidism</a>  Study Documents:	Title Acronym:  Other Ids: CTAP101-CL-3007	Not yet recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Disease stage3</li><li>Chronic Kidney Disease stage4</li><li>Vitamin d Deficiency</li><li>Secondary Hyperparathyroidism</li></ul>	<ul style="list-style-type: none"><li>Drug: CTAP101 CTAP101 Capsules is an extended-release (ER) oral formulation of calcifediol which was approved as Rayaldee® ER Capsules in June 2016 by the United States (US) Food and Drug Administration (FDA) for the treatment of secondary hyperparathyroidism (SHPT) in adult patients with stage 3 or 4 chronic kidney disease (CKD) and vitamin D insufficiency (VDI), defined as serum total 25-hydroxyvitamin D levels less than 30 ng/mL.</li><li>Drug: Placebo Placebo</li></ul>	Study Type: Interventional  Phase: Phase 3  Study Design: Allocation: Randomized Intervention Model: Sequential Assignment Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 108  Original Estimated Enrollment: <i>Same as current</i>  Age: 8 Years to 17 Years (Child)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: October 2022  Primary Completion: July 2025 (Final data collection date for primary outcome measure)  Study Completion: July 2025  First Posted: September 16, 2022  Results First Posted:  Last Update Posted: September 16, 2022

19	NCT03832595	<a href="#">Kidney Coordinated Health Management Partnership</a>  Study Documents:	Title Acronym:  Other Ids: PRO18070620 <a href="#">R18DK118460 ( U.S. NIH Grant/Contract )</a> <a href="#">1R01DK116957-01A1 ( U.S. NIH Grant/Contract )</a>	Enrolling by invitation	Chronic Kidney Diseases	<ul style="list-style-type: none"><li>Other: Intervention Arm</li></ul> An EHR in-basket message will be sent to the patient's PCP which identifies the patient's high-risk CKD status and indicates that the patient will receive:  <ol style="list-style-type: none"><li>Nephrologist led electronic consultation: review of the patient's EHR with recommendations sent to the PCP every ~6 months,</li><li>Medication therapy management: PharmD led telephonic medication therapy management with the patient every ~6 months,</li><li>and Nurse led CKD patient education, every ~6-12 months</li></ol> unless the PCP opts the patient out of the interventions (by responding to the EHR in-basket message and providing an opt-out reason or requesting an office consultation with nephrology).  <ul style="list-style-type: none"><li>Other: Usual Care</li></ul> Patients in the usual care arm will continue to receive CKD care guided by their PCPs as per usual care practices (i.e., specialty consultation, pharmacotherapy, nurse education, etc. may be ordered by the PCP according to their usual practice).	Study Type: Interventional  Phase: Not Applicable  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Cluster randomized controlled trial with randomization occurring at the Primary Care Physician practice level Masking: Single (Outcomes Assessor) Masking Description: outcomes are ascertained by data programmers who are blinded to study arm assignment Primary Purpose: Treatment  Primary Outcome Measures: Decline in estimated Glomerular Filtration Rate (eGFR) or End Stage Renal Disease (ESRD) [ Time Frame: Through study completion, an average of 24 months ] A less than or equal to 40% decline in eGFR or ESRD. eGFR decline will be adjudicated based on the baseline creatinine and eGFR determined from the CKD-epidemiology (CKD-EPI) equation and measured routinely in clinical practice. ESRD will be defined as an eGFR less than or equal to 10ml/min to account for patients with markedly reduced baseline eGFR values (i.e., 16-20ml/min).  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 1650  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 85 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: <ul style="list-style-type: none"><li>Vanderbilt University Medical Center</li><li>National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)</li></ul>	Study Start: May 1, 2019  Primary Completion: July 31, 2022 (Final data collection date for primary outcome measure)  Study Completion: August 2024  First Posted: February 6, 2019  Results First Posted:  Last Update Posted: September 13, 2022
20	NCT05348733	<a href="#">A Study Called FINE-REAL to Learn More About the Use of the Drug Finerenone in a Routine Medical Care Setting</a>  Study Documents:	Title Acronym:  Other Ids: 21785	Recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Disease</li><li>Type 2 Diabetes Mellitus</li></ul>	Drug: Kerendia (Finerenone, BAY94-8862) Decision will taken by the treating physician to initiate treatment with finerenone.	Study Type: Observational  Phase:  Study Design: Observational Model: Cohort Time Perspective: Prospective  Primary Outcome Measures: <ul style="list-style-type: none"><li>Descriptive analysis of clinical characteristics of patients with chronic kidney disease (CKD) and with type 2 diabetes(T2D). [ Time Frame: Approximately 42 months ]</li><li>Descriptive summary of reasons for introducing finerenone. [ Time Frame: Approximately 42 months ]</li><li>Descriptive summary of reasons for discontinuation of finerenone. [ Time Frame: Approximately 42 months ]</li><li>Planned and actual duration of treatment with finerenone [ Time Frame: Approximately 42 months ]</li><li>Descriptive summary of dose of finerenone treatment [ Time Frame: Approximately 42 months ]</li><li>Descriptive summary of frequency of finerenone treatment [ Time Frame: Approximately 42 months ]</li><li>Descriptive summary of concomitant medication used in patients with CKD and T2D. [ Time Frame: Approximately 42 months ]</li></ul> Secondary Outcome Measures: <ul style="list-style-type: none"><li>Occurrence of adverse events (AEs) and serious adverse events (SAEs) [ Time Frame: Approximately 42 months ]</li><li>Occurrence of hyperkalemia [ Time Frame: Approximately 42 months ]</li></ul> leading to study drug discontinuation, dialysis or hospitalization	Actual Enrollment:  Estimated Enrollment: 4000  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: June 13, 2022  Primary Completion: November 15, 2025 (Final data collection date for primary outcome measure)  Study Completion: March 15, 2026  First Posted: April 27, 2022  Results First Posted:  Last Update Posted: September 14, 2022

21	NCT05142501	<a href="#">Observation of the Immune Response After COVID-19 Additional Vaccine Doses in Chronic Patients in Hemodialysis Therapy</a>  Study Documents:	Title Acronym:  Other Ids: HD-COVID-IR-EU	Terminated	<ul style="list-style-type: none"><li>Chronic Kidney Diseases</li><li>COVID-19</li><li>Hemodialysis</li></ul>	Other: Blood samples Four consecutive blood sampling throughout the overall follow-up period of 12 months.	Study Type: Observational  Phase:  Study Design: Observational Model: Other Time Perspective: Prospective  Primary Outcome Measures: Humoral immune response [ Time Frame: 12 months after start of study ] The humoral immune response will be assessed at four different timepoints (Sample 1: prior to the third vaccine dose; sample 2: 1 months after the third vaccine dose; sample 3: 6 months after the third vaccine dose; sample 4: 12 months after the third vaccine dose or max. 4 weeks prior to the fourth vaccine dose, whichever comes first) through the measurement of the titers of Bioplex IgG antibody panel in study participant's blood samples.  Secondary Outcome Measures: Not Provided	Actual Enrollment: 23  Estimated Enrollment:  Original Estimated Enrollment: 340  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: April 25, 2022  Primary Completion: September 2, 2022 (Final data collection date for primary outcome measure)  Study Completion: September 2, 2022  First Posted: December 2, 2021  Results First Posted:  Last Update Posted: September 15, 2022
22	NCT05524467	<a href="#">Cross-sectional Study to Assess Prevalence and Burden of CKD-associated Pruritus in Haemodialysis Patients</a>  Study Documents:	Title Acronym:  Other Ids: CS-DFK-2021-0712	Not yet recruiting	Chronic Kidney Disease-associated Pruritus	Not Provided	Study Type: Observational  Phase:  Study Design: Observational Model: Cohort Time Perspective: Cross-Sectional  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 4810  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: November 2022  Primary Completion: September 2023 (Final data collection date for primary outcome measure)  Study Completion: December 2023  First Posted: September 1, 2022  Results First Posted:  Last Update Posted: September 13, 2022



23	NCT05497700	<a href="#">Comparative Efficacy of Ephedrine Versus Norepinephrine to Correct Anesthesia Induction Related Hypotension</a>  Study Documents:	Title Acronym:  Other Ids: VASO_IRC	Recruiting	Hypotension on Induction	<ul style="list-style-type: none"><li>• Drug: Ephedrine Bolus injection of 6 mg ephedrine to keep mean arterial blood pressure above 65 mm Hg</li><li>• Drug: Norepinephrine Bolus injection of either 6 mcg norepinephrine to keep mean arterial blood pressure above 65 mm Hg</li></ul>	Study Type: Interventional  Phase: Phase 3  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Masking Description: Drug will be prepared by an anesthesia nurse not involved in the care of the patient and labeled as "VASO-IRC-inclusion number". Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 60  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 70 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: September 15, 2022  Primary Completion: September 30, 2023 (Final data collection date for primary outcome measure)  Study Completion: October 30, 2023  First Posted: August 11, 2022  Results First Posted:  Last Update Posted: September 16, 2022
24	NCT02683889	<a href="#">Use of Acthar in Patients With FSGS That Will be Undergoing Renal Transplantation</a>  Study Documents:	Title Acronym:  Other Ids: 17-2336	Recruiting	FSGS	Drug: Acthar patients will receive acthar 80 units twice a week for 6 months and will measure recurrence of FSGS	Study Type: Interventional  Phase: Phase 3  Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Prevention  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 20  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 80 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Georgetown University</a>  Collaborators: Not Provided	Study Start: February 1, 2019  Primary Completion: December 2023 (Final data collection date for primary outcome measure)  Study Completion: December 2023  First Posted: February 17, 2016  Results First Posted:  Last Update Posted: September 16, 2022

25	NCT03736005	<a href="#">Skeletal Muscle Wasting and Renal Dysfunction After Critical Illness Trauma - Outcomes Study</a>  Study Documents:	<div>Title Acronym:</div> <div>Other Ids: KRATOSProtocolv1.2</div>	Completed	<ul style="list-style-type: none"><li>• Critical Illness</li><li>• Acute Kidney Injury</li><li>• Muscle Loss</li><li>• Major Trauma</li><li>• Quality of Life</li><li>• Chronic Kidney Diseases</li></ul>	Other: Exposure of significant critical illness Exposure. Observational study with all patients invited to follow-up clinic for kidney, muscle and functional assessments.	<div>Study Type: Observational</div> <div>Phase:</div> <div>Study Design: Observational Model: Cohort Time Perspective: Prospective</div> <div>Primary Outcome Measures: <i>Same as current</i></div> <div>Secondary Outcome Measures: <i>Same as current</i></div>	<div>Actual Enrollment: 40</div> <div>Estimated Enrollment:</div> <div>Original Estimated Enrollment: 62</div> <div>Age: 18 Years and older (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Not Provided</div>	<div>Study Start: December 19, 2018</div> <div>Primary Completion: December 1, 2021 (Final data collection date for primary outcome measure)</div> <div>Study Completion: January 1, 2022</div> <div>First Posted: November 8, 2018</div> <div>Results First Posted:</div> <div>Last Update Posted: September 14, 2022</div>
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26	NCT03534141	<div><div><div><a href="#">Mild Hypothermia and Acute Kidney Injury in Liver Transplantation</a></div><div>Study Documents:</div></div></div>	<div>Title Acronym:</div> <div>Other Ids: 17-22384</div>
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27	NCT05136664	<a href="#">Trial Evaluating the Efficacy and Safety of Patiromer in Chinese Subjects</a>  Study Documents:	Title Acronym:  Other Ids: PAT-CHINA-303 CTR20212173 (Registry Identifier: Center for Drug Evaluation (CDE), NMPA )	Recruiting	<ul style="list-style-type: none"><li>Hyperkalemia</li><li>Renal Insufficiency, Chronic</li></ul>	<ul style="list-style-type: none"><li>Drug: Patiromer Powder for Oral Suspension (Part A) Participants initiate patiromer at an oral dose of 1 packet/day (8.4g/day as powder for suspension). The dose is adjusted at the following visit based on local serum potassium (sK+) levels.  The content of each packet should be mixed with water, apple or cranberry juice before administration.</li><li>Drug: Placebo (Part B) Placebo is provided in packets, each containing 6 g of placebo as powder for suspension. Participants will take 1 packet per day, by mixing its content with water, apple or cranberry juice.</li><li>Drug: Patiromer Powder for Orals Suspension (Part B) Participants will continue to receive the same number of packets established during Part A, but dose may be up- or down titrated depending on sK+ levels.  The content of each packet should be mixed with water, apple or cranberry juice before administration.</li></ul>	Study Type: Interventional  Phase: Phase 3  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: 2-part, single-blind, randomised withdrawal, placebo-controlled (Part B), parallel group study that includes a 4-week patiromer treatment phase (Part A) followed by an 8-week randomised placebo-controlled withdrawal phase (Part B). Masking: Single (Participant) Primary Purpose: Treatment  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 200  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Tigermed Consulting Co., Ltd	Study Start: February 10, 2022  Primary Completion: March 2024 (Final data collection date for primary outcome measure)  Study Completion: March 2024  First Posted: November 29, 2021  Results First Posted:  Last Update Posted: September 16, 2022
28	NCT05542927	<a href="#">Incidence of Acute Kidney Injury and Mortality in Critically Ill Patients: Urinary Chloride as a Prognostic Marker</a>  Study Documents:	Title Acronym:  Other Ids: 541/2022	Recruiting	Acute Kidney Injury	Diagnostic Test: urine chloride Serum chloride, urinary chloride & serum creatinine will be requested on the first day of admission in Intensive Care Unit (ICU). 2. Serum chloride & urinary chloride will be requested every 48 hours in ICU with correlation between urinary chloride concentrations, AKI & mortality. 3. Serum creatinine will be requested every 24 hours in ICU. 4. Monitoring of Urinary Output (U.O.P.) every 24 hours	Study Type: Observational [Patient Registry]  Phase:  Study Design: Observational Model: Cohort Time Perspective: Prospective  Primary Outcome Measures: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 90  Original Estimated Enrollment: <i>Same as current</i>  Age: 21 Years to 90 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: September 1, 2022  Primary Completion: February 28, 2023 (Final data collection date for primary outcome measure)  Study Completion: March 30, 2023  First Posted: September 16, 2022  Results First Posted:  Last Update Posted: September 16, 2022

29	NCT05170945	<a href="#">Early Routine Bowel Preparation for Suspected Acute Diverticular Bleeding</a>  Study Documents:	<div>Title Acronym:</div> <div>Other Ids: 003.GID.2020.D</div>	Recruiting	Diverticular Bleeding	Other: Early bowel preparation for colonoscopy Early (<24 hours) bowel cleansing prior to colonoscopy.	<div>Study Type: Interventional</div> <div>Phase: Not Applicable</div> <div>Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Masking: None (Open Label) Primary Purpose: Treatment</div> <div>Primary Outcome Measures: <i>Same as current</i></div> <div>Secondary Outcome Measures: <i>Same as current</i></div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 415</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: 18 Years and older (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Not Provided</div>	<div>Study Start: May 6, 2020</div> <div>Primary Completion: May 2023 (Final data collection date for primary outcome measure)</div> <div>Study Completion: May 2023</div> <div>First Posted: December 28, 2021</div> <div>Results First Posted:</div> <div>Last Update Posted: September 14, 2022</div>
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