

# CLINICAL AND PATHOLOGICAL CHARACTERISTICS OF NON-DIABETIC RENAL DISEASE IN TYPE 2 DIABETES PATIENTS

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### Introduction and Aims

Renal involvement in type 2 diabetes is mainly due to diabetic nephropathy (DN). Nevertheless, a sizable proportion of diabetic patients could actually have non-diabetic renal diseases (NDRD) or DN plus NDRD.

# Objectives

To explore the pathological features of NDRD in patients with type 2 diabetes and to assess the predictability of diagnosing NDRD with or without DN versus isolated DN on the basis of clinical parameters.

#### Methods

Medical records of type 2 diabetes patients who underwent renal biopsy under suspicion of NDRD from January 2011 through November 2015 were analyzed retrospectively.

#### Results

- A total of 101 patients with type 2 diabetes and atypical features of DN were enrolled in this study. The mean age was 51.3±11.9 years and the male to female ratio was 1.3:1. The median duration of the diabetes was 6 years (range, 1-20 years). The mean serum creatinine was 2.8±2.2 mg/dL and proteinuria was 5.8±3.4 g/day. Table 2 shows the results of renal biopsy.
- In multiple logistic regression analysis, short-duration diabetes (<8 years) and microscopic hematuria (≥5 erythrocytes per high-power field) were independent predictors of NDRD.

Table 1. Demographic and clinical characteristics of the study patients

Characteristics	Isolated DN (n=52)	Isolated NDRD (n=20)	DN plus NDRD (n=29)
Duration of diabetes-years	8.1 <u>+</u> 4.8	3.8 <u>+</u> 1.5ª	6.4 <u>+</u> 3.1
Presence of diabetic retinopathy-no (%)	44 (84.6)	3 (15)ª	19 (65.5) <sup>b,c</sup>
Fasting plasma glucose—mg/dL	183 <u>+</u> 5.7	140 <u>+</u> 6.7ª	164 <u>+</u> 5.3
HbA1c-%	8.5 <u>+</u> 1.0	7.3 <u>+</u> 0.1ª	8.1 <u>+</u> 1.1 <sup>c</sup>
Serum creatinine-mg/dL	2.69 <u>+</u> 2.05	1.45 <u>+</u> 0.50	3.90 <u>+</u> 2.06 <sup>b,c</sup>
Estimated GFR—ml/min/1.73 m <sup>2</sup>	38.2 <u>+</u> 27.6	58.7 <u>+</u> 23.9ª	31.8 <u>+</u> 31.5 <sup>c</sup>
Proteinuria-g/24 h	6.9 <u>+</u> 3.2	3.5 <u>+</u> 2.1 <sup>a</sup>	5.3 <u>+</u> 3.5
Urinary RBCs/hpf	2 <u>+</u> 4	12 <u>+</u> 9ª	7 <u>+</u> 8 <sup>b,c</sup>
Urinary WBCs/hpf	1 <u>+</u> 1	11 <u>+</u> 8ª	6 <u>+</u> 11 <sup>b</sup>

a: isolated DN vs. isolated NDRD b: isolated DN vs. DN plus NDRD

c: isolated NDRD vs. DN plus NDRD, all P < 0.05

Table 2. Renal pathology of NDRD, with and without DN, in type 2 diabetes patients\*

Histology	NDRD superimposed on DN ( <i>n</i> =29)	Isolated NDRD (n=20)	P Value
Acute tubular necrosis	14 (38.9%)	0 (0%)	<0.001
Acute interstitial nephritis	12 (33.3%)	1 (4.8%)	0.005
IgA nephropathy	1 (2.8%)	7 (33.3%)	0.003
Membranous nephropathy	0 (0%)	5 (23.8%)	0.004
Lupus nephritis	2 (5.6%)	4 (19.0%)	NS
Crescentic glomerulonephritis	3 (8.3%)	1 (4.8%)	NS
Others	4 (11.1%)	3 (14.3%)	NS

<sup>\*</sup>Some patients have more than one NDRD.

## Conclusions

Judicious use of renal biopsy revealed NDRD with or without DN in nearly half of type 2 diabetes patients with atypical renal presentation, especially short-duration diabetes and active urinary sediment.

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