

# INPLASY PROTOCOL

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**Conflicts of interest:**  
None declared.

## Finerenone reduces risk of cardiovascular outcomes in patients with chronic kidney disease and type 2 diabetes: A protocol for systematic review and meta-analysis

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**Review question / Objective:** Chronic kidney disease and type 2 diabetes are independently associated with cardiovascular outcomes, a leading cause of morbidity and mortality. Does finerenone reduce the risk of cardiovascular events while being very effective in the treatment of diabetic nephropathy? **P:**Patients with chronic kidney disease and type 2 diabetes; **I:**Finerenone; **C:**Placebo; **O:**Impact or risk factors or associated factors; **S:**RCT or cohort study.

**Condition being studied:** Chronic kidney disease and type 2 diabetes are independently associated with cardiovascular outcomes, a leading cause of morbidity and mortality.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 12 March 2022 and was last updated on 12 March 2022 (registration number INPLASY202230052).

### INTRODUCTION

**Review question / Objective:** Chronic kidney disease and type 2 diabetes are independently associated with cardiovascular outcomes, a leading cause of morbidity and mortality. Does finerenone reduce the risk of cardiovascular events while being very effective in the treatment

of diabetic nephropathy? **P:**Patients with chronic kidney disease and type 2 diabetes; **I:**Finerenone; **C:**Placebo; **O:**Impact or risk factors or associated factors; **S:**RCT or cohort study.

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## METHODS

**Participant or population:** Chronic kidney disease and type 2 diabetes.

**Intervention:** Finerenone.

**Comparator:** Placebo.

**Study designs to be included:** RCT or cohort study.

**Eligibility criteria:** Inclusion criteria<sup>1</sup>. The type of study must be a randomized controlled trial or cohort study<sup>2</sup>. Participants must be older than 18 years of age. Exclusion criteria<sup>1</sup>. Very small sample size<sup>2</sup>. Other relevant treatment prior to the intervention.

**Information sources:** PubMed, Embase database, Cochrane Library, Web of Science and China national knowledge infrastructure (CNKI).

**Main outcome(s):** Evaluating the proportion of cardiovascular outcomes in patients with chronic kidney disease and type 2 diabetes treated with finerenone.

**Data management:** EndNote.

**Quality assessment / Risk of bias analysis:** The Newcastle-Ottawa Scale (NOS) was used to verify the quality of the evidence.

**Strategy of data synthesis:** The multivariate adjusted pooled effect estimates were calculated using random-effects models or fixed-effects models depending on heterogeneity among studies.

**Subgroup analysis:** Important covariates such as race, country, economic circumstances or study design will be used as a classification basis for subgroup analysis. Subgroup analysis is intended to test heterogeneity and factors that may affect results.

**Sensitivity analysis:** After deleting any one of them, the combined results of the remaining papers were not significantly different from those without deletion, which means that the sensitivity analysis was passed.

**Country(ies) involved:** China.

**Keywords:** finerenone, chronic kidney disease, type 2 diabetes.

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