



Intravenous Ondansetron for the prevention of supine hypotensive syndrome during spinal anesthesia for cesarean section: A randomized controlled trial

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- Sodium–glucose co-transporter 2 inhibitors like Dapagliflozin have been proven effective for slowing chronic kidney disease (CKD) progression mainly in patients with higher levels of albuminuria.
- Understanding its real-world utilization and effectiveness among patients with CKD with urinary albumin-to creatinine ratio (UACR) < 200 mg/g can help clinical decision-making in this population.
- Dapagliflozin 10 mg initiation (in n=20,407) was associated with a clinically meaningful attenuation in eGFR slope (1.07 mL/min/1.73 m² /year) among patients with CKD and a UACR < 200 mg/g.
- OPTIMISE-CKD fills this gap as the first study to assess the real-world effectiveness of Dapagliflozin 10 mg for patients with non-diabetic CKD and lower levels of albuminuria.

Ondansetron can effectively prevent supine hypotensive syndrome during spinal anesthesia for cesarean section.

