

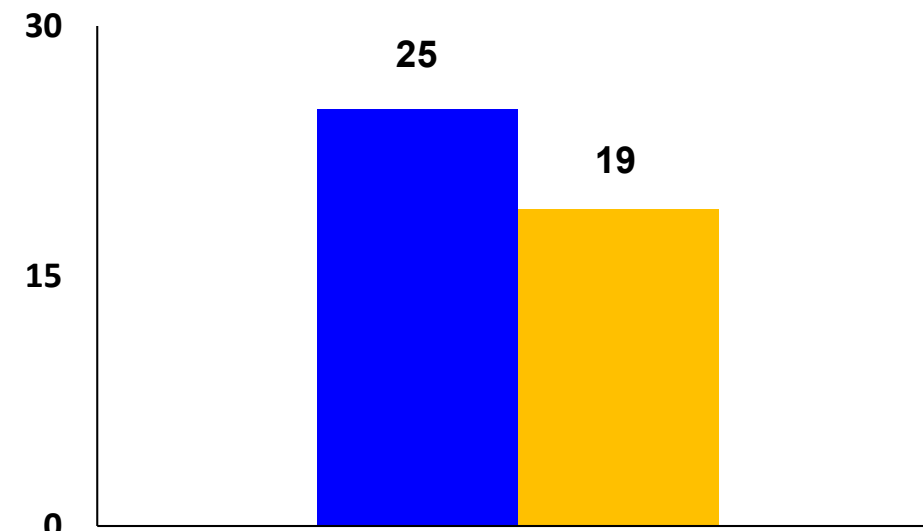
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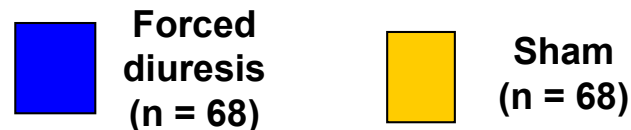
AMERICAN
COLLEGE *of*
CARDIOLOGY

Trial Description: Patients undergoing transfemoral TAVR were randomized to forced diuresis vs. sham. All patients received isotonic saline infusion (0.5-1 ml/kg/h, 12 hours prior to the procedure) and Foley catheter placement.

(p = 0.41)



Primary endpoint



RESULTS

- Primary efficacy endpoint, incidence of acute kidney injury, occurred in 25% of the forced diuresis group compared with 19% of the control group (p = 0.41)
- Long-term mortality: 28% of the forced diuresis group vs. 13% of the control group (p = 0.004)

CONCLUSIONS

- Among patients undergoing TAVR, forced diuresis was not superior to sham at preventing acute kidney injury
- The trial was terminated early due to futility and also a signal for possible harm

Arbel Y, et al. *Eur Heart J* 2019;40:3169-78