

Supplemental Material for

**Phloretin Improves Ultrafiltration and Reduces Glucose Absorption
during Peritoneal Dialysis in Rats**

Karin Bergling¹, Giedre Martus¹, Carl M. Öberg¹

¹ Lund University, Skåne University Hospital, Clinical Sciences Lund, Department of
Nephrology, Lund, Sweden

Supplemental Material File Listing

Intraperitoneal volume and GFR estimation methodology

Table S1 - Complementary results

Figure S1 – Mizagliflozin effect on volume and small solute transport

Corresponding Author

Dr. Karin Bergling, Njurmottagningen SUS Lund, Barngatan 2a, SE-221 85 LUND,
Sweden +4673-52 53 313, karin.bergling@med.lu.se

Intraperitoneal volume estimation using radioactive iodine 125-labeled human serum albumin (RISA)

The intraperitoneal volume during the dialysis dwell was determined using dilution of ¹²⁵I human serum albumin (RISA) by a modified method described by Zakaria and Rippe.¹ The initial mass (M_I) of RISA in the peritoneal cavity was assessed as instilled mass (M_O) – bound mass (M_B) as follows

$$M_I = 0.956M_O \quad (1)$$

The mono-exponential elimination of RISA mass from the dialysate was determined from

$$f(k_E, t) = e^{-k_E t} \quad (2)$$

Thus, if the mass M_t (Bq) is known at some timepoint T , then the mass at t minutes after this timepoint is $M_t \cdot e^{-k_E \cdot (t-T)}$. Accordingly, the intraperitoneal volume at the first sample can be determined from where t_1 is the time between the first sample and the start of dialysis and $C_{RISA,1}$ is the activity of RISA (Bq/mL) in this sample. To calculate subsequent volumes, corrections to the intraperitoneal mass of RISA need to be made to account for lost RISA mass in samples. The intraperitoneal volume at the n :th sample was calculated as follows

$$V_n = \frac{(V_{n-1} - V_{\text{sample},n-1})C_{RISA,n-1}f(k_E, t_n - t_{n-1})}{C_{RISA,n}} \quad (3)$$

Here $V_{\text{sample},n}$ is the sampling volume of the n :th dialysate sample and t_n is the time at which this sample was collected. The elimination coefficient (k_E) was determined using a root finding algorithm to determine the root of the function $F(k) = V_N(k) -$

$(V_{\text{out}} + V_{\text{sample},N})$ where N is the total number of samples. Lastly, to approximate the volume curve had there been no sampling, calculated volumes were corrected for the cumulative sampling volume as follows:

$$V_n = V_n + \sum_{k=1}^{n-1} V_{\text{sample},k} \quad (4)$$

This of course neglects the extra amount of UF that would have resulted from the sampled fluid, but since sampling volumes were small, between 45 to 140 μL , we regard this as a negligible error (underestimating total UF by $\sim 50\text{-}100$ μL) given other sources of variation in the data. The net ultrafiltration volume was calculated from:

$$\text{UF} = V_{\text{out}} - V_{\text{in}} + \sum_{k=1}^N V_{\text{sample},k} \quad (5)$$

Again, N is the total number of samples. To determine the clearance of albumin from the dialysate to plasma, the first-order dissipation of the total intra-vascular mass (M_{RISA}) of ^{125}I -albumin was described by the boundary value problem

$$\frac{dM_{\text{RISA}}}{dt} = -\text{TER} \cdot \frac{M_{\text{RISA}}}{\text{PV}} + \text{LM}_I f(t)/\text{IPV} \quad (6a)$$

$$C(0) = 0 \quad (6b)$$

$$C(t) = \text{PV} \cdot C_{\text{P,RISA}}(t) \quad (6c)$$

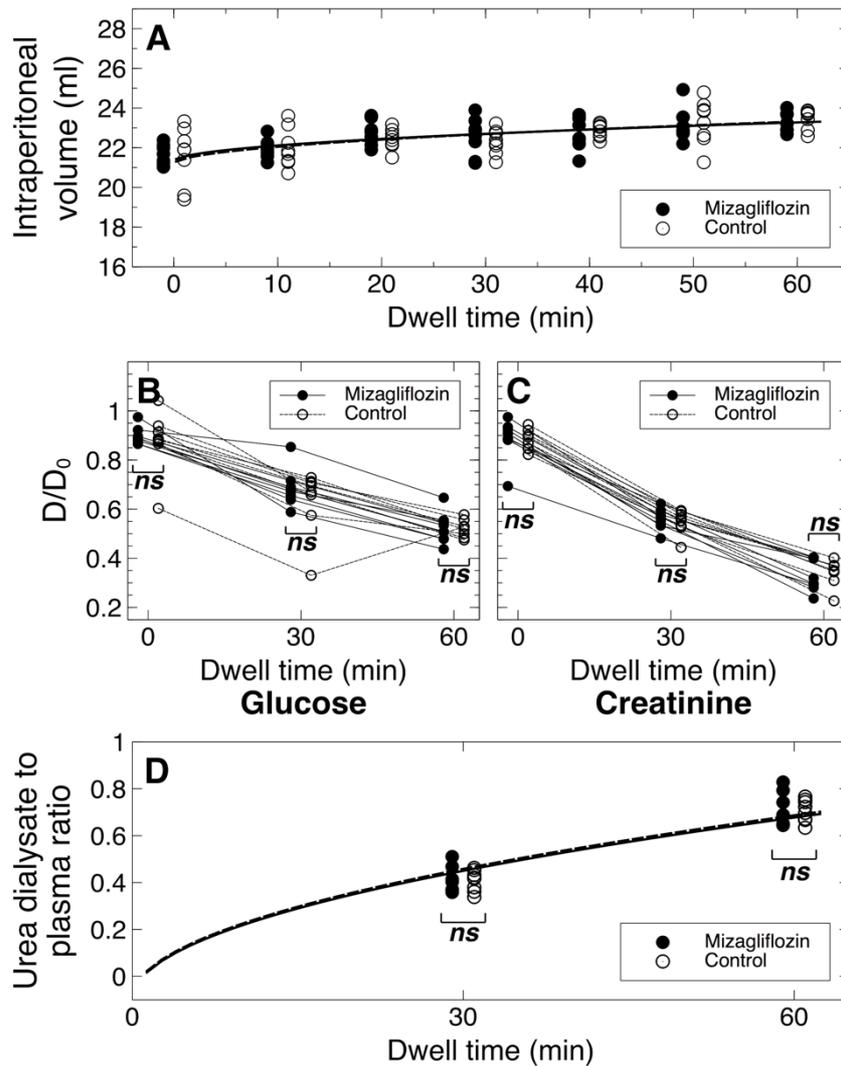
Here TER (min^{-1}) represents the transcapillary escape rate of intravascular ^{125}I concentration (estimated to $10\% \text{ min}^{-1}$ corresponding to a normal transcapillary escape rate in rats) and L is mass clearance out from the peritoneal cavity; t the total treatment time from the start of filling.² The boundary value problem (6a-c) was solved using a shooting method, solving the initial value problem (6a-b) using a 4:th order Runge-Kutta algorithm and then finding the root of $F(k_L) = m(T, k_L)/\text{PV} - C_{\text{P,RISA}}$.

GFR was estimated from the plasma to urine clearance of Cr-EDTA.

Table S1 - Effects of mizagliflozin and phloretin on plasma concentrations, D/D0 and D/P.

	Mizagliflozin	Control	<i>P</i>	95% CI for drug effect	Phloretin	Control	<i>P</i>	95% CI for drug effect
	Median (IQR)	Median (IQR)			Median (IQR)	Median (IQR)		
Plasma concentrations								
Glucose, mmol/L								
Pre-dialysis	14 (13 to 15)	14 (13 to 15)	ns	-2 to 2	12 (11 to 13)	13 (12 to 14)	ns	-3 to 1
Post-dialysis	14 (13 to 15)	13 (13 to 14)	ns	-1 to 2	14 (12 to 14)	13 (13 to 14)		-2 to 1
Creatinine, µmol/L								
Pre-dialysis	21 (20 to 22)	19 (18 to 21)	ns	-1 to 3	22 (18 to 24)	18 (18 to 20)	ns	-2 to 5
Post-dialysis	38 (37 to 44)	33 (32 to 33)	*	1 to 13	32 (30 to 34)	33 (28 to 38)	ns	-8 to 6
Urea, mmol/L								
Pre-dialysis	6 (5 to 6)	6 (6 to 6)	ns	-1 to 1	6 (6 to 7)	6 (6 to 7)	ns	-1 to 1
Post-dialysis	7 (6 to 8)	7 (7 to 7)	ns	-1 to 2	7 (6 to 8)	7 (6 to 7)	ns	-1 to 1
Sodium, mmol/L								
Pre-dialysis	136 (134 to 137)	135 (134 to 135)	ns	-1 to 2	136 (135 to 136)	136 (136 to 136)	ns	-1 to 3
Post-dialysis	136 (135 to 138)	136 (135 to 137)	ns	-1 to 2	137 (136 to 138)	137 (136 to 137)	ns	-1 to 2
Chloride, mmol/L								
Pre-dialysis	97 (97 to 99)	98 (98 to 99)	ns	-2 to 1	98 (97 to 100)	100 (98 to 100)	ns	-3 to 1
Post-dialysis	100 (99 to 101)	100 (100 to 101)	ns	-2 to 2	101 (100 to 102)	102 (100 to 103)	ns	-2 to 3
	Mizagliflozin	Control	<i>P</i>		Phloretin	Control	<i>P</i>	
	Median (IQR)	Median (IQR)			Median (IQR)	Median (IQR)		
Solute D/D0								
Glucose								
t = 1 min	0.89 (0.88 to 0.9)	0.88 (0.87 to 0.92)	ns		0.89 (0.86 to 0.9)	0.88 (0.86 to 0.9)	ns	
t = 30 min	0.67 (0.65 to 0.7)	0.68 (0.64 to 0.71)	ns		0.66 (0.63 to 0.71)	0.64 (0.64 to 0.66)	ns	
t = 60 min	0.52 (0.48 to 0.55)	0.52 (0.5 to 0.54)	ns		0.55 (0.52 to 0.58)	0.49 (0.47 to 0.5)	**	
Creatinine								
t = 1 min	0.9 (0.88 to 0.93)	0.88 (0.85 to 0.91)	ns		0.93 (0.92 to 0.93)	0.91 (0.88 to 0.93)	ns	
t = 30 min	0.56 (0.53 to 0.58)	0.56 (0.53 to 0.58)	ns		0.57 (0.53 to 0.58)	0.54 (0.51 to 0.58)	ns	
t = 60 min	0.31 (0.29 to 0.4)	0.35 (0.33 to 0.37)	ns		0.27 (0.22 to 0.38)	0.32 (0.32 to 0.38)	ns	
Urea D/P								
t = 30 min	0.39 (0.36 to 0.43)	0.42 (0.37 to 0.44)	ns		0.36 (0.33 to 0.38)	0.43 (0.38 to 0.46)	ns	
t = 60 min	0.69 (0.65 to 0.75)	0.71 (0.67 to 0.75)	ns		0.62 (0.57 to 0.63)	0.73 (0.69 to 0.76)	**	

Figure S1



Mizagliflozin effect on volume and small solute transport. A. Intrapertoneal volume as a function of dwell time estimated in mizagliflozin treated animals compared to sham. Solid line represents non-linear regression in drug exposed animals while dashed represent control group. **B-C.** D/D₀ ratios of glucose and creatinine at 1, 30 and 60 min. **D.** Urea dialysate to plasma (D/P) ratio at 30 and 60 min in mizagliflozin exposed animals and controls. Solid line represents non-linear regression in drug exposed animals while dashed represent control group.

REFERENCES

1. Zakaria ER, Rippe B. Intraperitoneal fluid volume changes during peritoneal dialysis in the rat: Indicator dilution vs. Volumetric measurements. *Blood Purif* 13: 255-70, 1995
2. Martus G, Bergling K, Oberg CM. Dual sglT1/sglt2 inhibitor phlorizin reduces glucose transport in experimental peritoneal dialysis. *Perit Dial Int* 8968608221080170, 2022