Tolvaptan Promotes Urinary Excretion of Sodium and Urea: A Retrospective Cohort Study

Journal:
Clinical and Experimental Nephrology

Satoshi Minami¹, Takayuki Hamano², Hirotugu Iwatani³, Masayuki Mizui¹, Yoshiki Kimura¹, Yoshitaka Isaka¹

1. Department of Nephrology, Osaka University Graduate School of Medicine, Suita, Osaka, Japan
2. Department of Comprehensive Kidney Disease Research, Osaka University Graduate School of Medicine, Suita, Osaka, Japan
3. Department of Nephrology, National Hospital Organization Osaka National Hospital, Chuo-ku, Osaka-city, Osaka, Japan

Correspondence:
Takayuki Hamano, MD, PhD
Department of Comprehensive Kidney Disease Research, Osaka University Graduate School of Medicine, D11, 2-2 Yamadaoka, Suita, Osaka, Japan 565-0871
Tel: +81-6-6210-8432; Fax: +81-6-6210-8433
Email: hamatea@kid.med.osaka-u.ac.jp
**Supplementary Fig. 1** Individual plot of serum creatinine concentration on the day before and after tolvaptan was first administered, stratified by response to tolvaptan in patients with decompensated heart failure. The dashed lines represent the data obtained from patients receiving peritoneal dialysis.
Supplementary Fig. 2 Individual plot of the growth in total kidney volume in ADPKD patients before and after tolvaptan treatment. ADPKD autosomal dominant polycystic kidney disease.