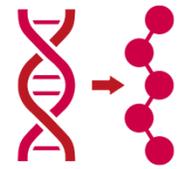


Exploring the Pathogenesis of Diabetic Kidney Disease (DKD) Progression by Urinary Single-Cell RNA Sequencing



Background

scRNAseq technology:



Gene expression at a single-cell level



Provides insights on subpopulations of cells & their roles in disease progression



Prognostic biomarker in early DKD

Urinary exfoliated kidney cells



Non-invasive biomarkers for DKD prognostication



Utility of urinary scRNAseq in determining the pathogenesis of DKD progression over time for optimization of therapy

Methods



baseline Adults with early DKD
eGFR 60-90ml/min/1.73m²



800-1000ml of urine were collected

Urinary exfoliated kidney cells



Washed, collected, labelled with barcoding antibodies



Stained with viability dyes



The same number of viable cells from each sample were sorted by an INCYTO hemocytometer



BD Rhapsody Single Cell Analysis System & bioinformatics analyses

Results

n=8 DKD



Progressive



vs



non-progressive

Numerous kidney, hematopoietic & epithelial cell types were identified:



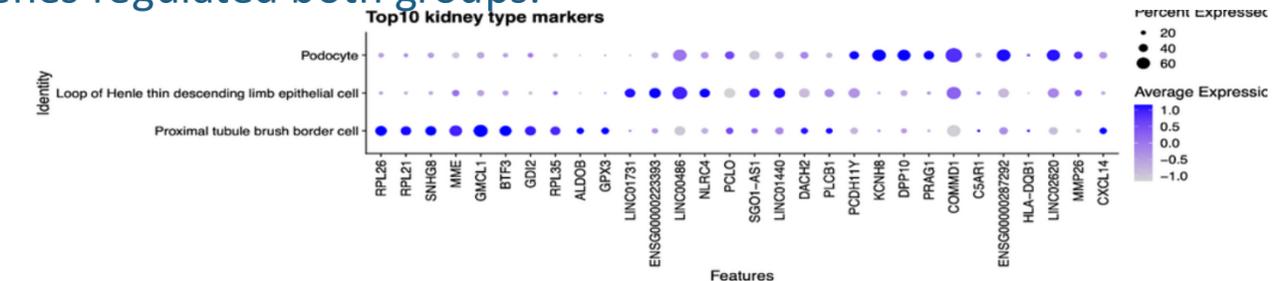
Predominant cell: **20% PTCs**

Exfoliated more PTCs

$p < 0.05$

Exfoliated Less PTCs

scRNAseq analysis of the urinary cells elucidated genes expressed & genes regulated both groups:



Signaling pathways that are significantly regulated between the 2 groups were identified:

Mitochondrial & Metabolic pathways

(PPAR signaling & toll-like receptors)



Inflammation pathways (IFN γ , IL-6, Activator Protein-1 which modulate NF- κ B activity)

Oxidative stress

Fibrosis pathways (TGFB & SMAD)

scRNAseq, single-cell RNA sequencing; PTCs, Proximal tubule cells; progressive or non progressive group was defined as per the KDIGO 2024 guideline

Conclusion: scRNAseq of urinary cells is a viable, non-invasive method to monitor DKD. Progressive DKD patients can be distinguished from non-progressive patients by a significantly higher exfoliation of PTCs and distinct genetic signatures. Disease progression is driven by measurable changes in mitochondrial, oxidative stress, fibrosis, inflammation, and metabolic pathways.

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