

Elevated Risk for Cognitive Decline with Albuminuria

Risk association suggests common microvascular pathology.

Kidneys that leak albumin and the brains of patients with cognitive decline share certain features of microvascular pathology. To assess this relation, investigators used the database of a large randomized controlled trial of the angiotensin-receptor blocker (ARB) telmisartan (Micardis) during 5 years of follow-up.

Of 28,384 patients (mean age, 67; mostly white men; 63% current or former smokers), 16% had albuminuria at baseline. In adjusted analysis at baseline, patients with micro- or macroalbuminuria had a higher likelihood (27% and 51%, respectively) of having cognitive impairment (Mini-Mental State Examination [MMSE] score <24) than did those with normoalbuminuria. In 2173 people who had worsening albumin status at 5 years, adjusted likelihood of experiencing a drop of 3 points or more in MMSE score for patients whose status changed from normoalbuminuria to micro- or macroalbuminuria was 30% and 77% higher, respectively, compared with those who remained normoalbuminuric. Risk for cognitive decline was lower in patients with macroalbuminuria who took telmisartan (the maker of which funded the study).

Comment: These results come from a secondary analysis and should be replicated in a dedicated prospective study. However, they are interesting both with regard to albuminuria-related risk and the lower risk associated with ARB treatment.

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