# Department of Internal Medicine Division of Diabetes, Metabolism and Endocrinology

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## **General Summary**

The number of patients we see in our division is more than 15,000 a month and is increasing every year. The patients we see most often have diabetes (including 10% with type 1 diabetes) but some have endocrinological disorders.

We attempt to provide the best healthcare to our patients on the basis of research evidence, clinical expertise, and patients' preferences. To accomplish this goal, we encourage the members of our division to perform basic and clinical research of high quality. With respect to education, we accept international students from other institutions. We encourage our trainees to improve their presentation skills. In addition, we strongly encourage our investigators to write manuscripts and publish their findings.

## **Research Activities**

#### Epidemiology

1. Clinical trials of the treatment of patients with diabetes using continuous glucose monitoring

2. A nationwide epidemiologic study of mortality in approximately 3,500 patients with type 1 diabetes was started in 1986 and has continued to provide important information about the prognosis of Japanese children with type 1 diabetes

3. A population-based study of childhood obesity, insulin resistance and diabetes in the elderly, and genetic factors has also continued in Niigata Prefecture

4. Epidemiological study using data from more than 6,000 patients with diabetes from the 4 hospitals affiliated with The Jikei University

#### Diabetic vascular complications

1. Molecular mechanisms governing intracellular signal transduction focusing on cell types relevant to diabetic vascular complications

2. Roles of small guanosine triphosphate-binding protein Rho and Rho-kinase in renal, retinal, neuronal, and endothelial biology

3. Isoform-specific roles of Rho and Rho-kinase protein in the pathogenesis of microvascular and macrovascular complications were studied. Approaches to this study range from *in vitro* to *in vivo* using gene-targeting approaches in mice

### Molecular biology for pancreatic islets

Type 2 diabetes is known as a "bi-hormonal disorder" because of the dysregulated insulin and glucagon secretion. Reduced  $\beta$  cell mass is a major cause of dysregulated insulin secretion. Although a combination of elevated levels of glucose and free fatty acids (glucolipotoxicity) strongly induces  $\beta$  cell dysfunction and cell death, the underlying cause remains unclear. In addition, the precise molecular mechanism of glucagon secretion from  $\alpha$  cells need to be elucidated. We found that serine/threonine kinase protein kinase c (Pkc)  $\delta$  is involved in  $\beta$  cell death and glucagon secretion from  $\alpha$  cells. Ongoing projects are as follows.

1. Elucidation of the molecular mechanism(s) of Pkc $\delta$ -dependent  $\beta$  cell mass reduction induced by glucolipotoxicity model using  $\beta$  cell specific Pkc $\delta$  knockout mice

2. Elucidation of the molecular mechanism(s) of Pkcδ-dependent glucagon secretion in glucagon-secreting cell line

3. Construction glucagon-secreting cell line

### Endocrinology

1. Basic research

1) The role of 12-lipoxygenase in diabetic cardiomyopathy

2) The role of baroreflex sensibility on diabetic macroangiopathy, especially the effects of glycemic variability and blood pressure variability

3) Effect of a sodium-dependent glucose transporter (SGLT) 2 inhibitor in a rat model of diabetes

4) Effect of aldosterone in macula lutea degeneration

2. Clinical research

1) Effect of a SGLT2 inhibitor in patients with diabetes

2) The role of baroreflex sensibility in patients with diabetes

3) The durability of basal insulin affects day-to-day glycemic variability assessed with continuous glucose monitoring in patients with type 2 diabetes

4) Investigation of HbA1c, blood pressure, and body weight variability in patients with type 2 diabetes

5) Achievement of the goals of HbA1c, blood pressure, and low-density lipoprotein cholesterol in patients with type 2 diabetes (the Japan Diabetes Clinical Data Management Study Group)

#### Publications

*Pieber TR, Bardtrum L, Isendahl J, Wagner L, Nishimura R.* Commentary to "Differential Effect of Hypoalbuminemia on Hypoglycemia on Type 2 Diabetes Patients Treated with Insulin Glargine 300 U/ml and Insulin Degludec" by Kawaguchi et al. Diabetes Therapy 2019. *Diabetes Ther.* 2020 Feb; **11**(2): 561-567.doi: 10.1007/s13300-019-00755-3. Epub 2020 Jan 10. PubMed PMID: 31925723; PubMed Central PMCID: PMC6995791.

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Kanda K, Mori Y, Yamasaki K, Kitano H, Kanda A, Hirao T. Long-term effects of low-intensity training with slow movement on motor function of elderly patients: a prospective observational study. *Environ Health Prev Med.* 2019 Jun 13; **24**(1): 44. doi: 10.1186/s12199-019-0798-4. PubMed PMID: 31189461; PubMed Central PMCID: PMC6563359.

Sakamoto M, Matsutani D, Minato S, Tsujimoto Y, Kayama Y, Takeda N, Ichikawa S, Horiuchi R, Utsunomiya K, Nishikawa M. Seasonal Variations in the Achievement of Guideline Targets for HbA1c, Blood Pressure, and Cholesterol Among Patients With Type 2 Diabetes: A Nationwide Population-Based Study (ABC Study: JDDM49). *Diabetes Care.* 2019 May; **42**(5): 816-823. doi: 10.2337/dc18-1953. Epub 2019 Feb 10. PubMed PMID: 30739885.

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#### **Reviews and Books**

*Matoba K, Takeda Y, Nagai Y, Kawanami D, Utsunomiya K, Nishimura R.* Unraveling the Role of Inflammation in the Pathogenesis of Diabetic Kidney Disease. *Int J Mol Sci.* 2019 Jul 10; **20**(14). pii: E3393. doi: 10.3390/ijms20143393. Review. PubMed PMID: 31295940; PubMed Central PMCID: PMC6678414.

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