



Cannabinoid Receptor 1 Inhibition in Chronic Kidney Disease: A New Therapeutic Toolbox

Myriam Dao^{1,2} and Helene François^{1,3*}

¹INSERM UMR_S 1155, Hôpital Tenon, Sorbonne Université, Paris, France, ²AP-HP, Néphrologie et Transplantation Rénale Adulte, Hôpital Necker Enfants Malades, Paris, France, ³AP-HP, Soins Intensifs Néphrologiques et Rein Aigu (SINRA), Hôpital Tenon, Sorbonne Université, Paris, France

OPEN ACCESS

Edited by:

Tony Jourdan,
INSERM U1231 Lipides, Nutrition,
Cancer (LNC), France

Reviewed by:

Deanne Helena Hryciw,
Griffith University, Australia
Liad Hinden,
Hebrew University of Jerusalem, Israel

*Correspondence:

Helene François
helene.francois@aphp.fr

Specialty section:

This article was submitted to
Cellular Endocrinology,
a section of the journal
Frontiers in Endocrinology

Received: 04 June 2021

Accepted: 22 June 2021

Published: 07 July 2021

Citation:

Dao M and François H (2021)
Cannabinoid Receptor 1 Inhibition
in Chronic Kidney Disease:
A New Therapeutic Toolbox.
Front. Endocrinol. 12:720734.
doi: 10.3389/fendo.2021.720734

Chronic kidney disease (CKD) concerns millions of individuals worldwide, with few therapeutic strategies available to date. Recent evidence suggests that the endocannabinoid system (ECS) could be a new therapeutic target to prevent CKD. ECS combines receptors, cannabinoid receptor type 1 (CB1R) and type 2 (CB2R), and ligands. The most prominent receptor within the kidney is CB1R, its endogenous local ligands being anandamide and 2-arachidonoylglycerol. Therefore, the present review focuses on the therapeutic potential of CB1R and not CB2R. In the normal kidney, CB1R is expressed in many cell types, especially in the vasculature where it contributes to the regulation of renal hemodynamics. CB1R could also participate to water and sodium balance and to blood pressure regulation but its precise role remains to decipher. CB1R promotes renal fibrosis in both metabolic and non-metabolic nephropathies. In metabolic syndrome, obesity and diabetes, CB1R inhibition not only improves metabolic parameters, but also exerts a direct role in preventing renal fibrosis. In non-metabolic nephropathies, its inhibition reduces the development of renal fibrosis. There is a growing interest of the industry to develop new CB1R antagonists without central nervous side-effects. Experimental data on renal fibrosis are encouraging and some molecules are currently under early-stage clinical phases (phases I and IIa studies). In the present review, we will first describe the role of the endocannabinoid receptors, especially CB1R, in renal physiology. We will next explore the role of endocannabinoid receptors in both metabolic and non-metabolic CKD and renal fibrosis. Finally, we will discuss the therapeutic potential of CB1R inhibition using the new pharmacological approaches. Overall, the new pharmacological blockers of CB1R could provide an additional therapeutic toolbox in the management of CKD and renal fibrosis from both metabolic and non-metabolic origin.

Keywords: cannabinoid, cannabinoid receptor type 1, chronic kidney disease, endocannabinoids, renal fibrosis